Membership Year:

TAL MEMBERSHIP TRANSMITTAL

Transmittal #

From:

(Post No.) (Post Location or Name)

Enclosed
M.O./Check #: for $

Make checks / money orders payable to The American Legion, Department of Washington.

Total Renewal Cards submitted with this Transmittal.

Total New Member Cards submitted with this Transmittal.

Total Membership

Prepared by

(Name) (Title)

(Email Address)

(Phone) (Date)

ALL MEMBERSHIP CARDS BEING SUBMITTED FOR PROCESSING TO DEPARTMENT HEADQUARTERS MUST BE ACCOMPANIED BY THIS TRANSMITTAL FORM

Per capita Washington:	$19.50
Per capita National:	$18.50
TOTAL PER CAPITA:	**$38.00**

Make certain amount of check or money order is correct for number of Membership Cards being transmitted.

Do not submit the New Member Application with the transmittal. Keep for post files. Ensure mailing address for new members is printed or typed on both sections of membership card.

Use separate transmittal for previous years.

Number Transmittals in consecutive order in space designated above and at left.

Use www.mylegion.org to verify paid members, update deceased members, address changes, and etc. Use Global Lookup on www.mylegion.org to find information on legion members who are 0110 members or members transferring into your post.

Mail to: Department of Washington
P.O. Box 3917
Lacey, WA 98509-3917

Questions? Contact Department Headquarters at (360) 491-4373 or membership@walegion.org

PLEASE do not staple, tape or mutilate cards and check -
Please list in alphabetical order the members being submitted or attach a list with this transmittal.

(Members Last Name)	(Membership Number)	(Members Last Name)	(Membership Number)
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