NOTES: Please review the manual in its entirety.

Please pay attention to the following sections:

- Membership Record Card – page 2
- Membership Record Card Samples 1a-1b – pages 18-19
- Corrections to a Members Record, Membership Record Card – page 12

Renewal Notice Cut-off Dates & Target Dates are located on Page 32. Transmittals must arrive at Department at least two working days prior to these dates.
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INTRODUCTION

Processing your Post’s membership can be both time consuming and complex. This manual has been developed to explain the proper procedures for processing membership. Please read the manual in its entirety before you begin to process membership. Even experienced officers can benefit from reviewing procedures.

At first, the manual may appear complicated. Do not be intimidated. Most membership processing is routine. However, there are some membership procedures which are not routine. This manual, although lengthy, is intended to give you one source of information for your questions concerning membership processing.

Additional information can be found in the Post Adjutant’s Manual. If you have any questions regarding the processing of membership, please feel free to contact the Department Membership Clerk at (860) 436-9986 or at membership@ctlegion.necoxmail.com

Thank you for your dedication in assuming this responsibility.

THE MEMBERSHIP YEAR

There is often confusion about The American Legion membership year. Does the year run from July to June or from January to December?

A member’s membership card is valid from the time of issue until December 31 of the calendar year printed on the card. After December 31, the member is considered delinquent. Posts begin collecting dues in July for the following calendar year.

Think of it as being like a magazine subscription. With a magazine subscription, you pay in advance so that you do not miss an issue. With The American Legion, we attempt to collect all dues between July and December for the coming year so the member remains in good standing, does not become delinquent, and will not miss out on any benefits.

BEFORE YOU BEGIN

1. The membership cards and roster are pre-printed at National Headquarters with members from the previous year received at National Headquarters before April 1. Memberships received after April 1 may not be reflected on the roster.
2. When you receive your Membership Roster for the new membership year, PLEASE CHECK IT FOR ERRORS. You will need to correct errors as you process membership. An explanation of the Membership Roster appears later in this manual. To make corrections to a member’s record, see “Corrections and Updates to Member’s Record” in this manual.
3. Check your pre-printed cards for errors. You will need to correct errors as you process membership. To make corrections to a member’s record – see “Corrections and Updates to Member’s Record” in this manual.
4. Compare your pre-printed cards with the roster list. Compare the sequence numbers on the cards with those on your Membership Roster. Use the following procedures for any discrepancies.
5. Missing Cards - If cards are missing, follow procedures outlined in this manual for “Renewals for which you do not have a pre-printed card”.

1
6. **Unknown Cards** - If you receive a pre-printed card for someone who is not a member of your Post, please return the entire card (all three sections) to Department with a note explaining why the card is being returned. Keep the card separate from those for which you are transmitting dues. Do not include the card in the count on the Membership Transmittal Form. Cross the record off the Membership Roster and note on the roster that the card was returned to Department.

7. **Duplicate Cards** – If you receive more than one pre-printed card for the same member, process one of the cards (the most accurate one) as usual. Return duplicate card using procedures in “Corrections and Updates to Member’s Record – Membership Record Card.”

8. Check your **membership supplies**. If you need anything contact Department Headquarters. You should always have the following supplies on hand.
   a. Member Data Forms
   b. Blank Cards
   c. Membership Transmittal Forms (current version)
   d. Membership Applications

9. Check Roster for **Honorary Life Members** to be paid by Post.

**MEMBERSHIP RECORD CARDS** (Samples 1a-1b, pages 18-19)

Each year membership cards are pre-printed at National Headquarters with the member information from the previous year received at National Headquarters before April 1.

The card has three parts. The extreme right is the “Official Membership Card” to be given to the member after dues have been paid. The National and Department portions of the card are known as the “Record Card.” The Record Card is transmitted to Department.

**Important Notes:**
1. Do NOT separate the National and Department portions of the Record Card.
2. Do NOT staple or tape anything to the Record Card.
3. To make corrections to a member’s record – see “Corrections and Updates to Member’s Record” in this manual.
4. Only use card for membership year for which you are transmitting dues.
5. See Sample 1 for a detailed explanation of the card.

**MEMBERSHIP ROSTER** (Sample 2, pages 20-23)

The roster will list in alphabetical order all your members from the previous year whose cards were received at National before April 1. Columns on the Membership Roster are explained as follows:
1. DATE PAID – Record the date member pays dues to Post.
2. DATE TRANSMITTED – Record the date the Post transmits dues to Department.
3. LAST PAID YEAR – Indicates last Membership Year the member was paid (as of April 1)
4. MEMBERSHIP NUMBER – Member’s 9-digit identification number.
5. CONT. YEARS – Number of continuous years of membership – Corrections should be made on Member Data Form or on the Membership Record Card.
6. NAME/ADDRESS/CITY/STATE/ZIP – Corrections should be made on Member Data Form.
7. CER FLAG – Certificate Flag – A number code will indicate a member has had a 50, 60, 70, 75, or 80-year continuous membership certificate printed. Only the most recent certificate code will be reflected.

8. EX FLAG – Exclusion Flag - A “C” code means the member will not receive a dues renewal notice. If a “D” code appears, the member will not receive a renewal notice or The American Legion Magazine. Call Department Headquarters for any corrections.

9. ERA – Identifies the war era on file at National for the member, showing the first war era the member served. Code descriptions are located at the end of the roster. War era corrections should be reported on the Membership Record Card or on a Member Data Form.

10. TY – The “Type” code identifies one of three types of life membership:
   a. “H” indicates Honorary Life membership – The Post is responsible for payment of the member’s annual dues.
   b. “P” indicates Paid Up For Life Member.
   c. “*” (asterisk) indicates Honorary PUFL.

11. UN – A “U” identifies those individuals, reported by the U.S. Postal Service, as having an address that is not correct. The mail is undeliverable. Any member with a “U” code on their record will not receive any mail from National or the Department. Posts are asked to verify address and contact Department.

12. SEQUENCE NO. – This 6-digit number, which is also printed on the card, can help the Post find the card or the members name on the roster.

**Important Notes:**
1. Sample 2 on pages 18-21 shows sample roster entries.
2. To make corrections to a member’s record, see the section titled “CORRECTIONS AND UPDATES TO MEMBER’S RECORD.”

**RENEWALS (TRADITIONAL)**

Traditional renewals will be processed in one of two ways:
A. Renewals for which you have a preprinted card, or
B. Renewals for which you do NOT have a preprinted card

**A. Renewals for which you have a preprinted card** (Samples 1a-1b, pages 18-19)

1. Fill in “Date Paid” on the center card.
2. Initial “Post Adjutant’s Initials” on the center card.
3. Place an “X” in the “Renewal” box of the center card.
4. Sign the member’s portion of the card as “Authorized Post Officer.”
5. Separate the member’s card from the Record Card. Give or mail the card to the member promptly.
6. Do NOT separate the National and Department portions of the Record Card.
7. Find the member’s name on the roster and mark the date paid in the appropriate column.
8. To make corrections to a member’s record, see the section titled “CORRECTIONS AND UPDATES TO MEMBER’S RECORD.”
9. Transmit the card following procedures outlined in this manual.

**B. Renewals for which you do NOT have a preprinted card** (Samples 1a-1b, pages 18-19)
1. Take the next available blank card from those supplied by Department. The serial number on the card will be the same as the 6-digit sequence number printed on the roster explained earlier.

2. Type or print legibly on the left and center cards the following information exactly the way it was previously reported.
   a. Membership ID number (obtain from previous year roster, Department, or member)
   b. Post number
   c. Years of continuous membership
   d. First name, middle initial, last name of member
   e. Mailing address
   f. Phone number
   g. Date of birth
   h. Email
   i. War Era – first war era served
   j. Branch of Service
   k. Gender

3. Fill in “Date Paid” on the center card.
4. Initial “Post Adjutant’s Initials” on the center card.
5. Put an “X” in the “Renewal” box.
6. Type or print member’s Department (CT), Post #, and Member ID# number on the member’s card above the description.
7. Type or print the member’s name on the first line of the member’s card.
8. Enter continuous years on the member’s card.
9. Sign the member’s card as “Authorized Post Officer.”
10. Separate the member’s card from the Record Card. Give or mail the card to the member.
11. Do NOT separate the National and Department portions of the Record Card.
12. Find the sequence number of the card on the roster and enter the member’s information on the roster.
13. Transmit the card following procedures outlined in this manual.

ONLINE RENEWSALS

Members of The American Legion have the option to renew and pay membership online.

A. Procedures for Members:

1. On the renewal notice, members will see the online renewal option and the web address, www.legion.org/renew, to process their renewal payment.
2. To begin the online renewal process, members will be asked to enter their membership ID# and last name.
3. A page verifying the member’s current information on file will appear. The member can provide any missing information and update any incorrect information to his/her membership record.
4. Using a MasterCard, Visa, or Discover credit card, the member can enter payment information. Once the payment is processed; the member will view a “Membership Renewal Confirmation” with a link to print the Electronic Fulfillment Form.
5. The Electronic Fulfillment Form (Sample 3a, page 24) opens to print. It has three sections – a thank you from the National Adjutant with instructions on how to obtain the official card from
the Post, a temporary card and proof of payment for the member to carry until the official card is received, and a payment slip to mail to the Post.

6. If the original Electronic Fulfillment Form is lost, the member can return to the renewal page on the website and enter his/her name and membership number and reprint the form.

B. Procedures for Posts: (Samples 3a-3c, pages 24-26)

1. The Post must first verify which members have renewed online. The Post can attain information on which Post members have renewed online by three different methods:
   a. The member can provide The Electronic Fulfillment Form to the Post. The payment receipt on the bottom of the form will include the member’s name, ID#, and the membership year. (Sample 3a, page 24)
   b. Posts using the free MyLegion.org website can generate reports listing all members who have renewed online as often as needed. The Post can enter a beginning date and ending date and a list of members of the Post who have renewed online will appear. (Sample 3b, page 25) A report can be printed by selecting the “Generate PDF” button on the screen.
      For more information on MyLegion.org, see the section later in this manual or visit the website at www.mylegion.org.

2. Once the Post has confirmed the online payment, the official membership card can be issued by the Post to the member.

3. Sign the member’s portion of the card as “Authorized Post Officer.”

4. Separate the member’s card from the Record Card. Give or mail the card to the member.

5. The Post needs to include the National and Department portions of the card in your transmittal to Department. (Make sure you write ONLINE on the Department Section)

6. Find the member’s name on the roster. In the Date Paid column, indicate the date the member renewed online. In the Date Transmitted column, write “Online”.

7. Post per capita (dues) will be provided in the form of a credit on the Post’s membership account, similar to the procedure used for Paid Up For Life (PUFL) members. Credits can be used for membership only. See section on “Account Balances” in this manual for details.

8. Online renewals will be reflected on the Department Membership Report during the month following the renewal.
AUTOMATIC RENEWAL PAYMENTS

Members have the option of signing up for automatic renewal using their credit/debit cards. To enroll, the members should follow the procedures for renewing online. During the renewal process, the member will have the option of setting up recurring payments for future membership years. The Post should follow the procedures as outlined in the “Online Renewals” section of this manual to process the membership.

EMAIL RENEWAL NOTICES

Members renewing online have the option of receiving future renewal notices by email. By selecting the box on the online form, the member agrees to receive the first two notices for renewal each year via email only. If the member has not renewed his/her membership after the first two notices, the member will begin receiving notices by standard mail in addition to the email notices.

NEW MEMBERS (Samples 1a-1b, pages 18-19)

**Important Notes:**

1. Always ask a prospective member if he/she currently belongs or has recently been a member. If the answer is yes, obtain the member’s membership ID number from the member or by contacting Department Headquarters. If the member has a Membership ID number established, it should be used to prevent a duplicate record being created.
2. If the member has a current membership card, follow the procedures for a transfer as outlined later in this manual.
3. If the membership is not current (expired), process as a new member in the procedures outlined as follows using the member’s established ID number.

<table>
<thead>
<tr>
<th>Important Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Take the next available blank card from those supplied by Department. The serial number on the card will be the same as the 6-digit sequence number printed on the roster explained earlier. This will be the member’s ID number until it is established at National.</td>
</tr>
<tr>
<td>2. Type or print legibly on the left and center cards the following information.</td>
</tr>
<tr>
<td>a. Membership ID number (obtain from Department, or member) or 6-digit sequence number if member does not have an ID number established.</td>
</tr>
<tr>
<td>b. Post number</td>
</tr>
<tr>
<td>c. Years of continuous membership</td>
</tr>
<tr>
<td>d. First name, middle initial, last name of member</td>
</tr>
<tr>
<td>e. Mailing address</td>
</tr>
<tr>
<td>f. Phone number</td>
</tr>
<tr>
<td>g. Date of birth</td>
</tr>
<tr>
<td>h. Email</td>
</tr>
<tr>
<td>i. War Era – first war era served</td>
</tr>
<tr>
<td>j. Branch of Service</td>
</tr>
<tr>
<td>k. Gender</td>
</tr>
<tr>
<td>3. Fill in “Date Paid” on the center card.</td>
</tr>
<tr>
<td>4. Initial “Post Adjutant’s Initials” on the center card.</td>
</tr>
<tr>
<td>5. Put an “X” in the “New” box of the center card.</td>
</tr>
<tr>
<td>6. Type or print member’s Department CT), Post #, and Member ID# number on the member’s card above the description.</td>
</tr>
<tr>
<td>7. Type or print the member’s name on the first line of the member’s card.</td>
</tr>
</tbody>
</table>
8. Enter continuous years on the member’s card. (Enter 1 for new member.)
9. Sign the member’s card as “Authorized Post Officer.”
10. Separate the member’s card from the Record Card. Give or mail the card to the member.
11. Do NOT separate the National and Department portions of the Record Card.
12. Find the sequence number of the card on the roster and enter the member’s information on the roster.
13. Transmit the card following procedures outlined in this manual.

**Important Notes:**
1. Keep membership application on file – Do NOT send to Department. Transmit the Record Card only.
2. Do NOT send in a Member Data Form for new members. Transmit the Record Card only.

**TRANSFERS**

Transfers will be processed in one of three ways:
A. Transfers for which you are transferring a member from another Department
B. Transfers for which you are transmitting dues (member is paying the post)
C. Transfers for which you are NOT transmitting dues (member has already paid dues)

**A. Transfers for which you are transferring a member from another Department**

(Sample 4 pg 26/Samples 1a-1b, pgs 18-19)

1. Complete the following sections of a Member Data Form:
   a. Member ID number (obtained from Department or member)
   b. Department Alpha Code (CT)
   c. Post # (OLD Post #)
   d. Name (First, MI, Last, Suffix)
   e. Member Transferring from: Department & Post
   f. Member Transferring to: Department & Post
   g. Signature of Post Adjutant (required)
   h. Signature of Member (Signature of member may be waived if Post Adjutant certifies member was contacted and agrees to transfer.)

2. Mail parts 1-3 of Member Data Form to Department Headquarters with transmittal.
3. Retain part 4 for the Post’s records.

**B. Transfers for which you are transmitting dues (member is paying the post)**

1. Take the next available blank card from those supplied by Department. The serial number on the card will be the same as the 6-digit sequence number printed on the roster.
2. Type or print legibly on the left and center cards the following information.
   a. Membership ID number (obtain from Department, or member) or 6-digit sequence number if member does not have an ID number established.
   b. Post number
   c. Years of continuous membership
   d. First name, middle initial, last name of member
   e. Mailing address
   f. Phone number
   g. Date of birth
h. Email
i. War Era – first war era served
j. Branch of Service
k. Gender

3. Fill in “Date Paid” on the center card.
4. Initial “Post Adjutant’s Initials” on the center card
5. Put an “X” in the “Transfer” box of the center card.
6. Type or print member’s Department (CT), Post #, and Member ID# number on the member’s card above the description.
7. Type or print the member’s name on the first line of the member’s card.
8. Enter continuous years on the member’s card.
9. Sign the member’s card as “Authorized Post Officer.”
10. Separate the member’s card from the Record Card. Give or mail the card to the member.
11. Do NOT separate the National and Department portions of the Record Card.
12. Find the sequence number of the card on the roster and enter the member’s information on the roster.
13. Transmit the card following procedures outlined in this manual.

C. Transfers for which you are NOT submitting dues (Sample 4, page 26)

1. Complete the following sections of the Member Data Form:
   a. Member ID number
   b. Department Alpha Code (CT)
   c. Post # (Old Post #)
   d. Name (First, MI, Last, Suffix)
   e. Member Transferring from: Department & Post
   f. Member Transferring to: Department & Post
   g. Signature of Post Adjutant (required)
   h. Signature of Member (Signature of member may be waived if Post Adjutant certifies member was contacted and agrees to transfer.)

2. Mail parts 1-3 to Department Headquarters.
3. Keep part 4 for Post records.
4. Prepare a blank membership card for the member and discard the left and center cards. Give the prepared card to the member.
5. Record member information on Post Roster.

LIFE MEMBERSHIPS

There are two types of Life Memberships in the Department of Connecticut:
A. Honorary Life Members
B. Paid Up For Life Members (PUFL)

A. Honorary Life Members

1. Posts have recognized outstanding members for exceptional service or accomplishments by awarding what is known as Honorary Life Membership.
2. For Honorary Life Memberships, the Post assumes the responsibility of paying the annual dues for the remainder of the member’s life as long as they remain a member of that post. Check
your Post roster for those members who have been awarded Honorary Life Member status. Honorary Life Members will be indicated by an “H” in the TY column. See section on “Membership Rosters” for details.

3. Process Honorary Life Members as you would a traditional renewal.

4. If your Post awards an Honorary Life Membership, it should be reported to Department and National. To report an Honorary Life Member, complete the following sections of the Member Data Form: (Sample 5, page 27)
   a. Member ID number
   b. Department (CT)
   c. Post #
   d. Name (First, MI, Last, Suffix)
   e. Put an “X” in the box for Honorary Life Member
   f. Signature of Post Adjutant (required)

B. Paid Up For Life (PUFL) Member

1. Anyone who is currently an American Legion member or who is eligible for membership may become a PUFL member. Legionnaires can apply for PUFL membership online at www.legion.org/pufl. After providing a name and member ID number, the member will receive a cost quote, then he/she can pay by credit card, or print out a personalized form and mail it in with a check, money order or credit card information. Those without a member ID number can contact Customer Service at 1-800-433-3318 for their personalized offer.

2. Lifetime membership can be paid either in one single lump sum or over 36 equal, monthly payments. If a member chooses the Time Pay Plan, payment must be made by credit card. Once a member fulfills the PUFL membership dues, he/she will be protected from any future dues increases at the post, department or national levels.

3. All PUFL applications must be submitted to National Headquarters by one of three methods:
   a. Online applications: The member obtains a rate quote and/or submits an electronic application at www.legion.org/pufl. Once the quote is received, the member can opt to apply online, causing their record to appear for confirmation. Once confirmed and payment is complete, the member clicks “Submit” to finish the application process. Note: For those without internet access, the post or department can perform the process. A link to the PUFL application page has been added to myLegion.org for posts and departments.
   b. Printable applications: The member obtains a rate quote and/or prints an application at www.legion.org/pufl. Once the quote is received, the member can opt to print an application to complete and mail to National Headquarters. The application will be pre-filled with the member’s name, address, birth date, ID number and the total cost of PUFL membership. (Any updates to member’s record can be noted on the application.) The member simply mails the application and payment to National Headquarters at the address on the form. Note: For those without internet access, the application should be printed by the post or department and forwarded to the member for completion. A link to the PUFL application page has been added to myLegion.org for posts and departments.
   c. Call Customer Service: Members can speak to a customer service specialist by calling 1-800-433-3318. They can answer questions regarding cost, process or a member, as
well as print and mail PUFL applications or take them over the phone. Note: This should not be considered the primary procedure, as members, posts and departments have this ability.

4. When paid in full, the member will receive a permanent plastic card identifying him/her as a lifetime member. The PUFL member will also continue to receive an annual American Legion membership card.

5. No refund will be made if the member chooses to cancel membership, discontinue participation in the monthly payment plan, or if National Headquarters must close an account due to delinquency.

6. If a member chooses the monthly payment option and cancels or defaults, the member will not be eligible to participate in the monthly payment plan in the future. However, the member may apply with full payment at any time. Any funds previously submitted on the cancelled account will not be credited to the new application.

7. Once National Headquarters receives and processes an application, the member’s post will be notified and allowed 30 days to challenge. Departments will be copied on the notification.

8. A PUFL member may transfer to another participating post with the acceptance of the gaining post.

9. Should a PUFL member hold membership in a post whose charter has been canceled, and is unable to transfer to a local post, the member will be transferred to their respective department headquarters post.

10. If the member is expelled by action of his/her post or department headquarters, the unused portion of the PUFL fee, if any, maybe reviewed upon recommendation of the post and department with final decision by National Headquarters for any possible refund.

CORRECTIONS AND UPDATES TO MEMBER’S RECORD

Corrections can be made to a member’s record in three ways:
A. Member Data Form (preferred method)
B. MyLegion.org
C. Membership Record Card

A. Member Data Form (Sample 6, page 28)

All changes to a member’s record can be done with a Member Data Form.
1. The top section must be completed on all Member Data Forms and must include:
   a. Member ID #
   b. Department Alpha Code (CT)
   c. Post #
   d. Name of the member (As it currently appears on the member’s record)
2. The following corrections and updates may be done on the Member Data Form:
   a. Deceased
b. Name changes
c. Address changes
d. Telephone #
e. Email Address
f. Date of Birth
g. Continuous Years Membership
h. War Era
i. Branch of Service

3. All Transfers, Deceased, Honorary Life, and Continuous Years changes require the signature of the Post Adjutant.

4. Record all changes on Membership Roster.

5. Mail parts 1-3 to Department.

6. Retain part 4 for the Post’s records.

B. MyLegion.org (Sample 7, page 29)

All changes which can be done with a Member Data Form can also be performed online by Posts with MyLegion.org access, except transfers, which require a Member Data Form.

MyLegion.org is a free website designed to assist Post officers with everyday membership duties. For more information on features of MyLegion.org and to learn how to sign up your Post, visit www.mylegion.org or see the section later in this manual.

To make changes to a member’s record using MyLegion.org, simply access the member’s record by name or ID# and select “Edit Data”. The “Member Data Form” screen will appear. Make the necessary changes and select the “Submit Change” button. The changes will occur in the National membership database within 24 hours.

Note: Although members may be reported as deceased directly to National on MyLegion.org, for deceased members to be listed in Post Everlasting of the Connecticut Legionnaire, the Post must notify Department directly.

C. Membership Record Card (Samples 1a-1b, pages 18-19)

<table>
<thead>
<tr>
<th>Important Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do NOT write over the Member ID number on the Membership Record Card.</td>
</tr>
<tr>
<td>2. Do NOT write over the numbers in the scan line at the top of the Record Card.</td>
</tr>
</tbody>
</table>

1. **You must place an “X” in the box “Update record changes as noted” with a #2 pencil on left card. If you make a change without X’ing this box, it will not be caught by the scanning equipment.**

2. The following corrections and updates can be made on the Membership Record Card:
   a. Continuous Years
      1) Place an “X” in the box “Update record changes as noted” on the left card.
      2) Strike out the incorrect number on all three cards.
3) Print or type the correct continuous years on all three cards.
4) Record corrections and updates on the Membership Roster
5) Transmit the card following procedures outlined in this manual.

b. Name
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Put a line through the misspelled name and print or type the corrected name below the pre-printed name on the left and center cards.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

c. Mailing Address
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Put a line through the incorrect address and print or type the corrected address below the pre-printed preprinted address on the left and center cards.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

d. Phone #
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Put a line through the incorrect number and print or type the updated information below the pre-printed phone number or in place of the missing phone number on the left card.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

e. Date of Birth
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Put a line through the incorrect date and print or type the updated information below the pre-printed date or in place of the missing date on the left card.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

f. Email
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Put a line through the incorrect email and print or type the updated information below the pre-printed email or in place of the missing email on the left card.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

g. War Era
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Place an “X” in the box of the correct war era on the left card.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

h. Branch of Service
1) Place an “X” in the box “Update record changes as noted” on the left card.
2) Place an “X” in the box of the correct branch of service on the left card.
3) Record corrections and updates on the Membership Roster
4) Transmit the card following procedures outlined in this manual.

i. Deceased
1) Place an “X” in the box “Deceased” on left card.
2) Return the entire card (all three sections) to the Department – keep the card separate from those for which you are transmitting dues. Do NOT include in the count on the Membership Transmittal Form.

3) Make a note on the Membership Roster that the member is deceased and the card has been returned to Department.

j. Duplicate Membership Record
   1) If you receive more than one pre-printed card for the same member, process one of the cards (the most accurate one) as usual.
   2) On the other card, put an “X” in the box next to “Duplicate” on left card and record the ID number from the card you will process.
   3) Return all three parts of the card to Department. Keep the card separate from those for which you are transmitting dues. Do not include in the count on the Membership Transmittal Form.
   4) Cross the duplicate record off the Membership Roster.

TRANSMITTING MEMBERSHIP TO DEPARTMENT (Sample 8, page 30)

<table>
<thead>
<tr>
<th>Important Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do NOT separate the National and Department portions of the Record Card.</td>
</tr>
<tr>
<td>2. Do NOT staple or tape anything to the Membership Record Cards or the Membership Transmittal Form.</td>
</tr>
<tr>
<td>3. Make sure you are using a current version of the Membership Transmittal Form.</td>
</tr>
</tbody>
</table>

Memberships are transmitted to Department Headquarters using the Membership Transmittal Form. **Membership should be transmitted on a weekly basis.** Posts should also transmit before all Target Dates and Renewal Cut-off Dates. See the section later in this manual for details.

1. Check all cards to ensure they are completed properly using the procedures covered earlier in this manual.
2. Make sure you are using the correct year’s membership cards.
3. If you are transmitting dues for a previous membership year, use the card from that year.
4. Count the cards you are transmitting and make sure the count is accurate.
5. Make sure the member’s portion of the card has been removed and given to the member.
6. Fill in the “Date Transmitted” field on the roster for each member transmitted.
7. Do NOT separate the National and Department portions of the Record Card.
8. **Do NOT staple or tape anything to the Membership Record Cards or the Membership Transmittal Form.**
9. Make sure you are using a current version of the Membership Transmittal Form.
10. Fill in the date of the transmittal in the proper field.
11. Fill in number of members for which you are transmitting dues on appropriate lines.
12. Total the amount.
13. The check for the transmittal should be for MEMBERSHIP DUES ONLY. Do NOT include any other payments with your transmittal. Make checks payable to A.L Dept of CT.
14. Fill in the following fields:
   a. Transmittal #
   b. Date
   c. Post #
   d. Amount of payment
e. Enter in appropriate section what you are transmitting
f. Adjustments (membership credit)
g. Signature of Adjutant or Finance Officer
h. Address
i. Phone # of person to be contacted concerning the transmittal

15. Additional transmittal forms are available on the Department Website Ctlegion.org under Post froms

16. Mail Membership Transmittal Form, Record Cards, and check to:
   Connecticut Department, The American Legion
   Attn: Membership Clerk
   P.O. Box 208
   Rocky Hill, CT 06067

ACCOUNT BALANCES (Samples 8-9, pages 30-31)

Membership is processed daily at Department Headquarters. At the close of each day, the Posts’ Membership Account balances are computed. Post balances and statements can be requested at any time by contacting the membership clerk at Department Headquarters.

1. **Credit Balance** - If the Post has a credit, there will be a positive amount shown in the balance section. A credit balance can be caused by any of the following: (a) the Post has submitted too much money on a previous transmittal, (b) the Post has been credited with the Post’s portion of the Paid-Up-For-Life dues, or (c) the Post credited with the Post’s portion of online renewals. If a Post has a credit balance, it can only be used for membership. You can deduct the amount from your next membership transmittal. Be sure to note you are using the credit amount on the Membership Transmittal Form.

2. **Debit Balance** – A debit balance indicates the Post has not submitted enough money for membership. If your Post has a debit balance, it can be paid with membership. Add the debit amount to your next transmittal form. Be sure to note you are paying the debit balance on the Membership Transmittal Form. The debit balance can also be paid with a separate check. Write Membership Account on the memo line. All debit balances must be paid by June 1 of each year.

3. Be sure to maintain your account balance. Use credits when you have them and pay debits when you owe them. The goal is to have a zero account balance at all times.

TARGET & CUT-OFF DATES FOR RENEWAL NOTICES (Sample 10, page 32)

The membership target dates are listed in the Adjutant’s Manual each year. Every member the Post transmits in time for a Target Date helps the Department attain its goal. Some of the Target Dates are also Cut-off Dates for Renewal Notices. If the memberships are transmitted in time for the cut-off date, it will prevent the member from getting an unnecessary renewal notice.

In order for the transmittal to count for the target date or cutoff date, it must reach Department two working days prior to the National date. Mark the days you need to transmit on your calendar at the beginning of the membership year.

Department transmits as a minimum twice per month to National. Department always transmits immediately before a Target Date or Renewal Cut-Off Date.
**POST DATA REPORT** (Sample 11a, page 33)

Post Data Reports are mailed annually in February/March and should be returned before April 15. The Forms are used to correct Post information on record at National Headquarters. These forms need to be completed and returned even if there are no changes to the Post information. **This is the form used to report changes in Post dues and the dues mailing address before the membership year begins.**

**POST DATA FORM** (Sample 11b, page 34)

Post Data Forms may be used anytime during the year to report changes in Post dues or the mailing address where members submit their dues. The form is available in this manual, on the Department website at [www.ctlegion.org](http://www.ctlegion.org), or by request from Department.

**DIRECT RENEWAL FORM** (Sample 11c, page 35)

The Direct Renewal Form is used to indicate which renewal notices the Post would like to have sent by National. The forms are mailed in February/March and must be returned in April.

**MEMBERSHIP REPORTS**

Membership Reports can be found in the Department Bulletin or weekly online at [www.ctlegion.org](http://www.ctlegion.org). If you discover a discrepancy between the Membership Report and your Post records, please report it immediately to the Department Membership Clerk.

**POST OFFICER REPORTING FORM** (Sample 12a, page 36)

Most official mailings sent by the Department, including those related to membership processing, go to the Post Adjutant on record at Department. The Post Adjutant needs to be available throughout the year to respond to these mailings. A Post Officer Reporting Form should be completed each year, or whenever a Post Officer changes, to report the officers to Department. Forms are available at [www.ctlegion.org](http://www.ctlegion.org) or by request from Department. **Forms are due annually before September 15.**

**NOTIFICATION OF POST/SQUADRON COMMANDERS & ADJUTANTS** (Sample 12b, page 37)

The Post is to complete this form when the officers for the upcoming membership year are known. Forward the original (white) and its copy (blue) to the Department Headquarters. Do not detach the forms. If the post doesn’t sponsor an SAL Squadron, leave that section blank.

The submission of this form is in addition to, not in place of, the Post Officer Reporting form and the Squadron Officer Reporting form.

**DIRECT MEMBERSHIP SOLICITATION (DMS)**

The DMS program is a form of direct marketing used to solicit membership in The American Legion. While the DMS program has changed over the years, its purpose remains the same – to
bring new members into our organization. For the DMS program to be truly effective, it is imperative these new members are personally contacted and invited to transfer into a local Post.

When National gets a member through DMS, the member is placed in the Department Headquarters “holding post” in accordance with the current policies of the National Executive Committee.

Posts have access to contact information for new DMS acquired members in their area through MyLegion.org, explained later in this manual. Posts can transfer DMS members, as well as Post 200 members, at any time using the procedures outlined in this manual. The member must consent to being transferred into your local Post.

**HEADQUARTERS POST 200 MEMBERS** (Sample 13, page 38)

The Department Headquarters “holding post”, Post 200, is comprised primarily of members acquired through the DMS program. Many wish to transfer to a local Post. Your Post may receive a “Request to Transfer to a Local Post” from Department. Contact the member to see if he/she wishes to transfer into your Post. If the member agrees, complete a Member Data Form to transfer the member using the procedures described in this manual.

**Looking for prospective members?** Use myLegion.org to generate lists of Post 200 members and expired members in your zip code. Use the list to contact the members and invite them to join your Post. The member must consent to being transferred into your local Post.

**MYLEGION.ORG**

MyLegion.org is a free website designed to assist Post officers with everyday membership duties and to connect members of The American Legion to their Post and Department leadership as well as other American Legion members. This site can be accessed from any computer with an internet browser and internet access.

Posts with access can view members who have renewed online, generate rosters, submit Consolidated Post Reports (CPR), perform Member Data Form changes online for Legion and SAL members, publish a Post newsletter, publish a Post calendar and general announcements online, find potential members by utilizing lists of expired members and DMS members in their area, access publications and manuals, and communicate with other officers through the MyLegion.org Officer’s Forum.

Members can create a profile and get connected with other members, keep up-to-date with news, link to Post and Department calendars and websites, and communicate with other members. Go to www.mylegion.org to take a quick tour and print a post authorization form.
A/B/C/D/E/F – The characters that appear here make up the scan line. Do not change any of the information on this line. Do not mark in this area for any reason.

A  The permanent 9-digit member ID number, which remains the same as long as the member continues to pay dues annually or for life

B  The membership year

C  The department and post (and country when applicable)

D  These numbers serve as a counter – for example, if your post has 195 pre-printed cards for members from last year and you get an extra 25 blank cards (use for new members), the first card will have a 6-digit sequence number of 000001 and the last card will have 000220.

E  This variable number is important only to National Headquarters.

F  All American Legion cards have an “L,” and SAL cards have an “S.”

G  Only the first war era and one branch of service in which a member served is indicated. Update if blank on the pre-printed card.

H  Current phone number, date of birth and member’s email address. Update if blank on the pre-printed card.

I  Update as appropriate.

J  City in which the post is located
Sample 1b
Membership Record Card – Left, Center, Member
### Sample 2

<table>
<thead>
<tr>
<th>Date Paid &amp; Date Transmitted columns</th>
<th>Date roster was prepared</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Paid Year</td>
<td></td>
</tr>
<tr>
<td>Membership ID Number</td>
<td></td>
</tr>
<tr>
<td>Continuous Years Membership</td>
<td></td>
</tr>
<tr>
<td>UN column - Undeliverable</td>
<td></td>
</tr>
<tr>
<td>TY column</td>
<td></td>
</tr>
<tr>
<td>ERA column – War Era</td>
<td></td>
</tr>
<tr>
<td>CER FLAG column</td>
<td>Indicates last Continuous Years certificate printed by National</td>
</tr>
<tr>
<td>EX FLAG column</td>
<td>Check member's address</td>
</tr>
<tr>
<td>Sequence Number</td>
<td>matches sequence number on record card</td>
</tr>
</tbody>
</table>

#### Date Paid & Date Transmitted columns
- 06 90000001
- 06 90000002
- 06 90000003
- 06 90000004
- 06 90000005
- 06 90000006
- 06 90000007
- 06 90000008
- 06 90000009
- 06 90000010
- 06 90000011
- 05 90000011
- 05 90000012
- 05 90000013
- 05 90000014
- 05 90000015
- 05 90000016
- 05 90000017
- 05 90000018
- 05 90000019
- 05 90000020
- 05 90000021
- 05 90000022
- 05 90000023
- 05 90000024
- 05 90000025
- 05 90000026

#### Date roster was prepared
- 2007-02-12
- 2007-02-13
- 2007-02-14
- 2007-02-15
- 2007-02-16
- 2007-02-17
- 2007-02-18
- 2007-02-19
- 2007-02-20
- 2007-02-21
- 2007-02-22
- 2007-02-23
- 2007-02-24
- 2007-02-25
- 2007-02-26

#### Last Paid Year
- 06

#### Membership ID Number
- 90000001
- 90000002
- 90000003
- 90000004
- 90000005
- 90000006
- 90000007
- 90000008
- 90000009
- 90000010
- 90000011
- 90000012
- 90000013
- 90000014
- 90000015
- 90000016
- 90000017
- 90000018
- 90000019
- 90000020
- 90000021
- 90000022
- 90000023
- 90000024
- 90000025
- 90000026

#### Continuous Years Membership
- John A
- John B
- John C
- John D
- John E
- John F
- John G
- John H
- John I
- John J
- John K
- John L
- John M
- John N
- John O
- John P
- John Q
- John R
- John S
- John T
- John U
- John V
- John W
- John X
- John Y
- John Z

#### UN column - Undeliverable
- "U" Code = mail is undeliverable

#### TY column
- "H" Code = Honorary Life (Paid by Post)
- "P" Code = Paid Up For Life

#### CER FLAG column
- Indicates last Continuous Years certificate printed by National

#### ERA column – War Era
- 1 – WWI
- 2 – WWII
- 4 – Korea
- 8 – Vietnam
- G – Lebanon/Grenada
- H – Panama
- S – Persian Gulf
- T – WWII Merchant Marines

#### EX FLAG column - Check member’s address
- "C" Code = member will not receive dues renewal notice
- "D" Code = member will not receive renewal notice, magazine, or newspaper

#### Sequence Number
- Matches sequence number on record card
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
<th>Name</th>
<th>Address</th>
<th>Office</th>
<th>ST Code</th>
<th>ZIP Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/22</td>
<td>Name change</td>
<td>PUBLIC, JOHN A</td>
<td>PO BOX 1234</td>
<td>ANYTOWN</td>
<td>ST 99999</td>
<td>50</td>
<td>000001</td>
</tr>
<tr>
<td>2/22</td>
<td>Name change</td>
<td>PUBLIC, JOHN B</td>
<td>PO BOX 1234</td>
<td>ANYTOWN</td>
<td>ST 99999</td>
<td>4</td>
<td>000002</td>
</tr>
<tr>
<td>2/22</td>
<td>Name change</td>
<td>PUBLIC, JOHN C</td>
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<td>ST 99999</td>
<td>2</td>
<td>000003</td>
</tr>
<tr>
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<td>2</td>
<td>000004</td>
</tr>
<tr>
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</tr>
<tr>
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<td>ST 99999</td>
<td>2</td>
<td>000007</td>
</tr>
<tr>
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<td>PUBLIC, JOHN H</td>
<td>PO BOX 1234</td>
<td>ANYTOWN</td>
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<td>8</td>
<td>000008</td>
</tr>
<tr>
<td>2/22</td>
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<td>000009</td>
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<td>PO BOX 4321</td>
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<td>00010</td>
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<td>PO BOX 1234</td>
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<td></td>
<td>00011</td>
</tr>
<tr>
<td>2/22</td>
<td>Name change</td>
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<td>PO BOX 1234</td>
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<td>ST 99999</td>
<td>4</td>
<td>00012</td>
</tr>
<tr>
<td>2/22</td>
<td>Name change</td>
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<td>PO BOX 1234</td>
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<td>ST 99999</td>
<td>8</td>
<td>00013</td>
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<td>2/22</td>
<td>Name change</td>
<td>PUBLIC, JOHN N</td>
<td>PO BOX 1234</td>
<td>ANYTOWN</td>
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<td></td>
<td>00014</td>
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<tr>
<td>2/22</td>
<td>Name change</td>
<td>PUBLIC, JOHN O</td>
<td>PO BOX 1234</td>
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<td>ST 99999</td>
<td>4</td>
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<tr>
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<td>Name change</td>
<td>PUBLIC, JOHN P</td>
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<tr>
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<td>Name change</td>
<td>PUBLIC, JOHN Q</td>
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<td>2/22</td>
<td>Name change</td>
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<tr>
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<td>Name change</td>
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<td>C 2 H</td>
<td>00020</td>
</tr>
<tr>
<td>2/22</td>
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<tr>
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<td>PUBLIC, JOHN V</td>
<td>PO BOX 1234</td>
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<td>ST 99999</td>
<td></td>
<td>00022</td>
</tr>
<tr>
<td>2/22</td>
<td>Name change</td>
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<td>PO BOX 1234</td>
<td>ANYTOWN</td>
<td>ST 99999</td>
<td>C 2 H</td>
<td>00023</td>
</tr>
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<td>2/22</td>
<td>Name change</td>
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<td>ST 99999</td>
<td></td>
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<td>Name change</td>
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</tr>
<tr>
<td>2/22</td>
<td>Name change</td>
<td>PUBLIC, JOHN Z</td>
<td>PO BOX 1234</td>
<td>ANYTOWN</td>
<td>ST 99999</td>
<td></td>
<td>00026</td>
</tr>
</tbody>
</table>

**THE AMERICAN LEGION**

**MEMBERSHIP REGISTER**
<table>
<thead>
<tr>
<th>Date 1</th>
<th>Date 2</th>
<th>Seq. No.</th>
<th>Full Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>ZIP</th>
<th>88</th>
<th>88</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/22</td>
<td>2/25</td>
<td>900000039</td>
<td>Public, Jane E (renewal – no pre-printed card)</td>
<td>PO Box 1234</td>
<td>Anytown</td>
<td>ST 99999</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/23</td>
<td>2/25</td>
<td>900000100</td>
<td>Public, Jane G. (transfer with dues)</td>
<td>PO Box 1234</td>
<td>Anytown</td>
<td>ST 99999</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>900000101</td>
<td>Public, Jane H. (transfer without dues)</td>
<td>PO Box 1234</td>
<td>Anytown</td>
<td>ST 99999</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Transfer Member Data Form submitted 2/25 (dues were paid to former Post)
Sample 3a

Online Renewal – Electronic Fulfillment Form

THANKS! YOUR 2012 MEMBERSHIP DUES ARE PAID!

Print this form so that you have verification of online payment of your 2012 membership renewal. Your department and post will be notified that your dues have been paid. Your post has your 2012 Official Membership Card and should mail it to you shortly. Or to expedite receipt of your card, you can remove the bottom section of this form and mail or take it to your post to verify your renewal payment and receive your new card. You should also detach your receipt below; by cutting on the dotted line, and carry it with you until you receive your 2012 card from your post.

A message from the National Adjutant:

Thanks for renewing your membership in The American Legion, the world’s largest organization of veterans. I extend my heartfelt gratitude for your service to our great nation.

Whether you choose to get actively involved in The American Legion at the local level, or simply show your support through your membership, there is tremendous value in being an American Legion member. Together, we are accomplishing great things for veterans and their families - - and for a better America.

DANIEL S. WHEELER
National Adjutant

Please keep the receipt shown below for your records:

The member noted below has paid dues in the post indicated:

DAVID A KING - ID # 212345678
FL Post 0025 Contact Information:
Adjutant: ROBERT MOORE
Commander: JOHN W PLUNKETT

2012 Post Dues Paid: $50.00
Post Address:
1400 US HWY 27 N
LAKE PLACID FL 33852
Post Phone: 863-465-0975
Post Email: flpost25@embargmail.com

Mail or take this bottom portion to your post to expedite receipt of your new Official Membership Card.

ATTENTION: POST ADJUTANT/COMMANDER

The member noted below has paid his/her 2012 membership dues renewal online. The dues will be reimbursed through your Department. Please issue his/her Official Membership Card as soon as possible. Thank you.

ID #212345678 - DAVID A KING has renewed for 2012
Sample 3b
*Online Renewal – MyLegion.org Post Report*

Sample 3c
*Online Renewals – Post Report*
Sample 4

Transfers

THE AMERICAN LEGION MEMBER DATA FORM
(Please use ink and print clearly using UPPERCASE letters)

Date 2-23-08

Member ID # (9-digit) 700000001/00 Dept ST Post # 8888

Name JANE G PUBLIC

(First) (MI) (Last) (SuffFix)

MEMBERSHIP RECORD CHANGE

☐ Deceased  ☐ Honorary Life Membership (Awarded by Post)
☐ Paid-Up-For-Life Member (Purchased - for Post use only)

Name Correction:

(First) (MI) (Last) (SuffFix)

New Address:

Line 1

Line 2

City

State  Zip Code

☐ Check if applicable.  Member holds the above elected office or appointment in the Department or District

Telephone #:  E-Mail Address:

Date of Birth:  Cont. Years Mbship: ☐ for ☐ # Years Paid Mbsip Yr

Month  Day  Year (4-Digit)

War Era: Mark the appropriate box with an “X.” If more than one applies, please mark only the earliest War Era served.

☐ 4/6/17 - 11/11/18 (WWI)  ☐ 12/7/41 - 12/31/46 (WWII)
☐ 2/28/61 - 5/7/75 (Vietnam)  ☐ 8/24/82 - 7/31/84 (Grenada/Lebanon)
☐ 12/20/89 - 1/31/90 (Panama)  ☐ 8/2/90 - Cessation of hostilities as determined by U.S. Govt. (Persian Gulf)

Branch of Service:  Air Force  Army  Coast Guard  Marines  Navy

Member Transferring from:

Department (Alpha Code)  Former Post # 8888

Member Transferring to:

Department (Alpha Code)  New Post # 9999

Signature – Post Adjutant
(Required for Transfers, Deceased, Hon. Life and Cont. Years changes)

Signature – Member
(Required for Transfers)
**Sample 5**

*Reporting new Honorary Life Member*

---

**THE AMERICAN LEGION MEMBER DATA FORM**

(Please use ink and print clearly using **UPPERCASE** letters)

Date **2-23-08**

<table>
<thead>
<tr>
<th>Member ID # (9-digit)</th>
<th>Dept</th>
<th>Post #</th>
</tr>
</thead>
<tbody>
<tr>
<td>900000017</td>
<td>ST</td>
<td>9999</td>
</tr>
</tbody>
</table>

**Name**

<table>
<thead>
<tr>
<th>(First)</th>
<th>(MI)</th>
<th>(Last)</th>
<th>(Suffix)</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOH</td>
<td>N</td>
<td>PUB</td>
<td>LIC</td>
</tr>
</tbody>
</table>

**MEMBERSHIP RECORD CHANGE**

- [ ] Deceased
- [X] Honorary Life Membership (Awarded by Post)
- [ ] Paid-Up-For-Life Member (Purchased – for Post use only)

**Name Correction:**

<table>
<thead>
<tr>
<th>(First)</th>
<th>(MI)</th>
<th>(Last)</th>
<th>(Suffix)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**New Address:**

- **Line 1:**
- **Line 2:**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Telephone #:**

<table>
<thead>
<tr>
<th>E-Mail Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Date of Birth:**

<table>
<thead>
<tr>
<th>Month</th>
<th>Day</th>
<th>Year (4-digit)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Cont. Years Mbsp:**

<table>
<thead>
<tr>
<th># Years</th>
<th>Paid Mbsp Year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**War Era:** Mark the appropriate box with an “X.” If more than one applies, please mark only the earliest War Era served.

- [ ] 4/6/17 – 11/11/18 (WWI)
- [ ] 12/7/41 – 12/31/46 (WWII)
- [ ] 6/25/50 – 1/31/55 (Korea)
- [ ] 2/28/61 – 5/7/75 (Vietnam)
- [ ] 8/24/82 – 7/31/84 (Grenada/Lebanon)
- [ ] 12/20/89 – 1/31/90 (Panama)
- [ ] 8/2/90 - Cessation of hostilities as determined by U.S. Govt. (Persian Gulf)

**Branch of Service:**

- [ ] Air Force
- [ ] Army
- [ ] Coast Guard
- [ ] Marines
- [ ] Navy

**Member Transferring from:**

<table>
<thead>
<tr>
<th>Department</th>
<th>(Alpha Code)</th>
<th>Former Post #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Member Transferring to:**

<table>
<thead>
<tr>
<th>Department</th>
<th>(Alpha Code)</th>
<th>New Post #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Required for Transfers, Deceased, Hon. Life and Cont. Years changes)

**Signature – Post Officer**

(Required for Transfer)

**Signature – Member**

(Required for Transfer)

SEE INSTRUCTIONS ON REVERSE SIDE

National Headquarters Copy

Form No. 30-001 (2005)
# Sample 6

**Member Data Form**

<table>
<thead>
<tr>
<th>THE AMERICAN LEGION - MEMBER DATA FORM</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Please use ink and print clearly using UPPERCASE letters)</td>
</tr>
</tbody>
</table>

**Member ID# (9-digit) **

<table>
<thead>
<tr>
<th>Dept.</th>
<th>Post#</th>
</tr>
</thead>
</table>

**Name**

<table>
<thead>
<tr>
<th>First</th>
<th>Middle</th>
<th>Last</th>
<th>Suffix</th>
</tr>
</thead>
</table>

**Membership Record Change**

- Deceased
- Honorary Life Membership (Awarded by Post)
- Paid-Up-For-Life Member (Purchased for Post use only)

**Name Correction**

<table>
<thead>
<tr>
<th>First</th>
<th>Middle</th>
<th>Last</th>
<th>Suffix</th>
</tr>
</thead>
</table>

**New Address**

<table>
<thead>
<tr>
<th>Line 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line 2</td>
</tr>
<tr>
<td>City</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

**Check if applicable**

- Member holds the above designation or appointment in the Department or District

**Telephone #**

| - - - - - - - - |

**E-Mail Address:**

| - - - - - - - - |

**Date of Birth**

<table>
<thead>
<tr>
<th>Month</th>
<th>Day</th>
<th>Year (8-digit)</th>
</tr>
</thead>
</table>

**Cont. Years Mbsp:**

<table>
<thead>
<tr>
<th># Years</th>
<th>Paid Mbsp Year</th>
</tr>
</thead>
</table>

**War Era**

- Mark the appropriate box with an "X." If more than one applies, please mark only the earliest War Era served.

- 4/6/17 – 11/11/18 (WWI)
- 12/7/41 – 12/31/46 (WWII)
- 6/25/50 – 1/31/55 (Korea)
- 2/28/61 – 5/7/75 (Vietnam)
- 8/24/82 – 7/31/84 (Grenada/Libanon)
- 8/2/90 – Present (Gulf War/War on Terrorism)

**Branch of Service**

- Air Force
- Army
- Coast Guard
- Marines
- Navy

**Member Transferring from:**

<table>
<thead>
<tr>
<th>Department</th>
</tr>
</thead>
</table>

**Member Transferring to:**

<table>
<thead>
<tr>
<th>Department</th>
</tr>
</thead>
</table>

**Signature – Post Adjutant**

| Required for Members, Deceased, Honorary Life and Coast Guard Record Changes |

**Signature – Member**

| Required for Transferred |

---

SEE INSTRUCTIONS ON REVERSE SIDE

Stock# 70-401 (2013)  Act#60-1112

National Headquarters Copy
Sample 7

Correcting Members Record – MyLegion.org
Sample 8

Transmittal Form

THE AMERICAN LEGION
DEPARTMENT OF CONNECTICUT

MEMBERSHIP TRANSMITTAL NUMBER
DATE:  POST NUMBER

TO:  THE AMERICAN LEGION
OFFICE OF THE ADJUTANT
P.O. BOX 208
ROCKY HILL, CT  06067-0208

ATTACHED HEREWITH IS OUR REMITTANCE IN THE AMOUNT OF $_______ IN PAYMENT OF THE FOLLOWING:

| CURRENT YEAR (2018) MEMBERSHIP | 2018 CURRENT RENEWALS | @ $29.50 EACH | $ |
| 2018 NEW | @ $29.50 EACH | $ |
| TRANSFER-CARD AND DUES ENCLOSED | @ $29.50 EACH | $ |
| 2018 ONLINE RENEWALS | $ |

| PREVIOUS YEAR (2017) MEMBERSHIP | CURRENT RENEWALS | @ $29.50 EACH | $ |
| NEW | @ $29.50 EACH | $ |

| DELINQUENT MEMBERSHIP | 2017 RENEWALS | @ $29.50 EACH | $ |
| 2017 RENEWALS | @ $29.50 EACH | $ |
| TOTALS | $ |

ADJUSTMENTS TO REMITTANCE

| $ | ADDED TO COVER PRIOR SHORTAGE | $ |
| $ | REDUCTION REFLECTING CREDIT DUE POST | $ |
| | ADJUSTED TOTALS | $ |

POST RECORDS INDICATE THAT: (For Post use to track membership)

| # | PUFL |
| # | ONLINE RENEWALS |
| # | TRANSFERS FROM POST 200 |
| # | PAID FOR THE CURRENT YEAR 2018 |
| # | CURRENT TOTALS |

SIGNATURE ____________________________________  PHONE: __________________________
NAME: ______________________________________  email: __________________________
ADDRESS: ____________________________________  ________________
CITY / TOWN ____________________________________  (PLEASE PRINT)

29
## POST CREDITS & DEBITS

**

### POST #

<table>
<thead>
<tr>
<th>Date</th>
<th>PUFL</th>
<th>Current Yr</th>
<th>Previous Yr</th>
<th>Prior Yrs</th>
<th>AM'T PD.</th>
<th>BALANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017 Balance Fwd</td>
<td>7/22/2017</td>
<td></td>
<td></td>
<td></td>
<td>$79.90</td>
<td>$79.90</td>
</tr>
<tr>
<td>Check 1222</td>
<td>7/17/2017</td>
<td>24</td>
<td></td>
<td></td>
<td>$737.50</td>
<td>$109.40</td>
</tr>
<tr>
<td>JULY ONLINE</td>
<td>7/30/2017</td>
<td>3</td>
<td></td>
<td></td>
<td>$105.00</td>
<td>$125.90</td>
</tr>
<tr>
<td>CHECK 1223</td>
<td>8/8/2017</td>
<td>37</td>
<td></td>
<td></td>
<td>$1,091.50</td>
<td>$125.90</td>
</tr>
<tr>
<td>July PUFL</td>
<td>8/25/2017</td>
<td>3</td>
<td></td>
<td></td>
<td>$12.40</td>
<td>$138.30</td>
</tr>
<tr>
<td>Check 1255</td>
<td>8/28/2017</td>
<td>28</td>
<td></td>
<td></td>
<td>$826.00</td>
<td>$138.30</td>
</tr>
<tr>
<td>Check 1228</td>
<td>9/19/2017</td>
<td>1</td>
<td></td>
<td></td>
<td>$29.50</td>
<td>$138.30</td>
</tr>
<tr>
<td>Check 1226</td>
<td>9/21/2017</td>
<td>7</td>
<td></td>
<td></td>
<td>$206.50</td>
<td>$138.30</td>
</tr>
<tr>
<td>Check 1257</td>
<td>10/24/2017</td>
<td>3</td>
<td></td>
<td></td>
<td>$9.20</td>
<td>$59.00</td>
</tr>
<tr>
<td>October Online</td>
<td>11/1/2017</td>
<td>3</td>
<td></td>
<td></td>
<td>$105.00</td>
<td>$75.50</td>
</tr>
<tr>
<td>Check 1258</td>
<td>11/9/2017</td>
<td>3</td>
<td></td>
<td></td>
<td>$88.50</td>
<td>$75.50</td>
</tr>
<tr>
<td>Duplicate Trans (#4)</td>
<td>11/29/2017</td>
<td>-2</td>
<td></td>
<td></td>
<td>$0.00</td>
<td>$134.50</td>
</tr>
<tr>
<td>Check 1271</td>
<td>12/5/2017</td>
<td>2</td>
<td></td>
<td></td>
<td>$59.00</td>
<td>$134.50</td>
</tr>
</tbody>
</table>

**PLEASE NOTE!!!!**

A plus balance in the "Balance" indicates a credit balance in the post favor
A Red number in parenthesis indicates a negative balance and must be paid.
Sample 10
Renewal Cut-off Dates & Target Dates
Found in Post Adjutant’s Manual annually

2017-2018 RENEWAL NOTICE SCHEDULES

<table>
<thead>
<tr>
<th>CUTOFF DATES</th>
<th>RENEWAL DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAY 17, 2017</td>
<td>JULY 3, 2017</td>
</tr>
<tr>
<td>SEPTEMBER 20, 2017</td>
<td>OCTOBER 10, 2017</td>
</tr>
<tr>
<td>OCTOBER 25, 2017</td>
<td>NOVEMBER 17, 2017</td>
</tr>
<tr>
<td>DECEMBER 18, 2017</td>
<td>JANUARY 5, 2018</td>
</tr>
<tr>
<td>FEBRUARY 18, 2018</td>
<td>FEBRUARY 28, 2018</td>
</tr>
<tr>
<td>APRIL 18, 2018</td>
<td>APRIL 27, 2018</td>
</tr>
</tbody>
</table>

The above renewal notice schedule reflects the cutoff dates on which dues must arrive at National.
Transmittals must arrive at Department two (2) working days prior to the cutoff date.
Having all your renewals transmitted by the cutoff date prevents members from receiving an unnecessary renewal notice.

2017-2018 NATIONAL MEMBERSHIP TARGET DATES

<table>
<thead>
<tr>
<th>Date</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 13, 2017</td>
<td>50 %</td>
</tr>
<tr>
<td>October 11, 2017</td>
<td>55 %</td>
</tr>
<tr>
<td>November 15, 2017</td>
<td>65 %</td>
</tr>
<tr>
<td>December 13, 2017</td>
<td>75 %</td>
</tr>
<tr>
<td>January 18, 2018</td>
<td>80 %</td>
</tr>
<tr>
<td>February 14, 2018</td>
<td>85 %</td>
</tr>
<tr>
<td>March 14, 2018</td>
<td>90 %</td>
</tr>
<tr>
<td>April 11, 2018</td>
<td>95 %</td>
</tr>
<tr>
<td>May 9, 2018</td>
<td>100 %</td>
</tr>
</tbody>
</table>

Target dates fall on the second Wednesday of the month unless there is a holiday on that day or at the beginning of that week.
The November target date will be on the third Wednesday due to Veterans Day falling on that previous Friday.
To maximize the December renewal notice, and allow for MLK holiday, the January target date will be on the third Thursday of the month.

Transmittals must arrive at Department two (2) working days prior to the target date.
Sample 11a

Post Data Report

<table>
<thead>
<tr>
<th>CURRENTLY ON FILE</th>
<th>CHANGE OR CORRECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Post's Home (Physical) Address: UNKNOWN</td>
<td></td>
</tr>
<tr>
<td>2) Post's Mailing Address: 720 LYON ST DES MOINES IA 50309-5468</td>
<td></td>
</tr>
<tr>
<td>3) Post's Dues Mailing Address: AMERICAN LEGION POST 0729 PO BOX 361625 INDIANAPOLIS IN 46236-1625</td>
<td></td>
</tr>
<tr>
<td>Note: If the above address contains a member's name or is being sent to a member's home address as the contact, please provide the member's ID.</td>
<td></td>
</tr>
<tr>
<td>4) Current Annual Post Dues: $ 45.00</td>
<td>2018 Dues will be</td>
</tr>
<tr>
<td>NOTE: All new dues rates will be effective July 1st (1st renewal notice) unless an alternate effective date is entered.</td>
<td></td>
</tr>
<tr>
<td>5) Post's Telephone Number: 515-282-5068</td>
<td></td>
</tr>
<tr>
<td>6) Post's Fax Number: 515-282-7583</td>
<td></td>
</tr>
<tr>
<td>Note: Please DO NOT use personal phone numbers of members.</td>
<td></td>
</tr>
<tr>
<td>7) Post's Email Address: <a href="mailto:info@ialegion.org">info@ialegion.org</a></td>
<td></td>
</tr>
<tr>
<td>8) Post's Internet Website: UNKNOWN</td>
<td></td>
</tr>
<tr>
<td>9) Post's Meeting Date &amp; Time:</td>
<td></td>
</tr>
<tr>
<td>10) □ Check here if your Post has a Legion Riders Chapter.</td>
<td></td>
</tr>
</tbody>
</table>

---

**IMPORTANT NOTICE**

Complete and return this form to your Department Headquarters no later than **April 15, 2017**. Failure to meet this deadline may cause the first 2018 Renewal Notices to be mailed with incorrect information.

(Detailed instructions on reverse side)
**POST DATA FORM**

*** Immediate Response Requested ***

If at any time during the year, there is a change in Post dues or the mailing address where members mail their dues, the Post should notify the Department Headquarters immediately. The Department will then report the changes to National Headquarters.

Please make sure the data provided is correct and is submitted to your Department. If the change is made after the most recent renewal mailing, it will reflect on the following renewal notice. Failure to do so could cause membership renewals to be mailed to members with incorrect information.

*(Type or print in ink and forward to the Department)*

<table>
<thead>
<tr>
<th>Department of</th>
<th>Post Number</th>
</tr>
</thead>
</table>

$______ is the dues amount for the Post and to be billed to members for their 20___ membership.

**Effective date of change:**  ____________/__________/20___

| Month/day/year |

---

**Dues MAILING Address:**

**AMERICAN LEGION POST #**

________________________

________________________

________________________

________________________

*(Provide a complete address above)*

Note: If the above address contains a member's name or is being sent to a member's home address as the contact, please provide the member's 9-digit ID #: ________

---

**Post PHYSICAL Address:**

**AMERICAN LEGION POST #**

________________________

________________________

________________________

________________________

*(Provide a complete address above)*

---

**Authorized Post Officer’s Signature**

________________________

**Date**

________________________
Sample 11c
Direct Renewal Form

2018 DIRECT RENEWAL FORM

POST # _________

POST LOCATION (CITY) _________________________

In accordance with Resolution #1 passed by the Department Executive Committee on February 1, 2013, the following provisions are in effect for the 2017 Membership year.

1. At least one of the first two notices (July or October) must be selected by the Post.

2. Any Post returning the form, but failing to select one of the first two notices will by default receive the first (July) notice.

3. If a Post does not submit this selection form, both the first (July) and second (October) renewal notices become mandatory for the Post.

POST MUST SELECT AT LEAST ONE, AND MAY SELECT BOTH:

<table>
<thead>
<tr>
<th>Notice Type</th>
<th>Date</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIRST RENEWAL NOTICE</td>
<td>JULY 3, 2017</td>
<td>YES ____</td>
</tr>
<tr>
<td></td>
<td></td>
<td>NO ____</td>
</tr>
<tr>
<td>SECOND RENEWAL NOTICE</td>
<td>OCTOBER 10, 2017</td>
<td>YES ____</td>
</tr>
<tr>
<td></td>
<td></td>
<td>NO ____</td>
</tr>
<tr>
<td>THIRD RENEWAL NOTICE</td>
<td>NOVEMBER 17, 2017</td>
<td>MANDATORY</td>
</tr>
<tr>
<td>FOURTH RENEWAL NOTICE</td>
<td>JANUARY 5, 2018</td>
<td>MANDATORY</td>
</tr>
<tr>
<td>FIFTH RENEWAL NOTICE</td>
<td>FEBRUARY 28, 2018</td>
<td>MANDATORY</td>
</tr>
<tr>
<td>SIXTH RENEWAL NOTICE</td>
<td>APRIL 27, 2018</td>
<td>MANDATORY</td>
</tr>
</tbody>
</table>

POST COMMANDER or POST ADJUTANT _________________________________
(Printed name)

POST COMMANDER or POST ADJUTANT _________________________________
(Signature)
Sample 12a
Post Officer Reporting Form

2017-2018

NOTICE OF ELECTION OF OFFICERS
(Please type or print clearly)

POST NAME: ___________________________ POST NO. _______

ADDRESS: ___________________________ EMAIL: ____________

PHONE: ( ) ___________ DUES: $_____ MEETING DAY(s): __________

MEETING PLACE (location): ______________ TIME: ________

PLEASE INDICATE IF YOU HAVE A HALL THAT YOU RENT TO THE PUBLIC: [ ] YES [ ] NO

<table>
<thead>
<tr>
<th>ID NUMBER</th>
<th>NAME</th>
<th>HOME ADDRESS w/ZIP &amp; EMAIL</th>
<th>AREA-PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Commander</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adjutant</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Senior Vice Commander</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jr. Vice Commander</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Finance Officer</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chaplain</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Historian</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Service Officer</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sgt-at-Arms</td>
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</tbody>
</table>

Post Adjutant (outgoing)  Send Department Mail to:  Post Commander (outgoing)
[ ] Post Address Above; OR [ ] Adjutant’s Address Above; OR [ ] Commander’s Address Above

THIS LIST IS TO BE SUBMITTED TO DEPARTMENT ADJUTANT’S OFFICE IMMEDIATELY UPON ELECTION OF NEW OFFICERS.

MAIL A COPY TO YOUR DISTRICT ADJUTANT
Sample 12b
Commander & Adjutant Form

THE AMERICAN LEGION NATIONAL HEADQUARTERS
Notification of Post/Squadron Commanders & Adjutants

Department of ____________________ Post No. ________ Date ________

POST COMMANDER
Enter Member ID # ____________________ Incumbent __________ Newly Elected/Appointed __________
Name: ____________________________
Phone: ____________________________ Cell __________ Home __________ Work __________
Email: ____________________________

POST ADJUTANT
Enter Member ID # ____________________ Incumbent __________ Newly Elected/Appointed __________
Name: ____________________________
Phone: ____________________________ Cell __________ Home __________ Work __________
Email: ____________________________

(Complete this section if Post has an SAL Squadron.)

SQUADRON COMMANDER
Enter Member ID # ____________________ Incumbent __________ Newly Elected/Appointed __________
Name: ____________________________
Phone: ____________________________ Cell __________ Home __________ Work __________
Email: ____________________________

SQUADRON ADJUTANT
Enter Member ID # ____________________ Incumbent __________ Newly Elected/Appointed __________
Name: ____________________________
Phone: ____________________________ Cell __________ Home __________ Work __________
Email: ____________________________

SIGNATURE OF POST ADJUTANT

NATIONAL HEADQUARTERS COPY
Forms are sent by National Headquarters with Renewal Notices to members of Headquarters Post #200.

Completed forms are sent to Department who in turn sends them to local Post.

The local Post is responsible for contacting member, verifying eligibility, and processing the transfer.