

## American Legion Auxiliary Department of Missouri 600 Ellis Blvd, Jefferson City, MO 65101 Phone: 573-636-9133

dptmoala@outlook.com Website: www.dptmoala.org

## **2025 Unit Dues Verification**

Plea	ase comple	ete a	nd re	turn this	form	ı to th	ne Depa	rtment off	ice n	o later tha	n May 1, 2024 (Deadline)
	Unit #										
Duos an	Unit Nam		olow:	will bo n	rinto	d on	the 202	Mombors	hin I	Ponowal N	otices. Renewal notices are
Dues an	nounts nst	cu b	GIOW					th and Fel			otices. Reflewal flotices are
		_			_				_		
2025 Dues Rates											
							ndatory				
	National			artment			ount to			Total	
	Dues	+	Dues	<u> </u>	=	se	end in	Dues	=	Dues	
Senior	<b>.</b> 40.00		_	47.00		_	05.00				Total dues collected from Senior
Dues 	\$ 18.00	+	\$	17.00	=	\$	35.00		=		members (18 years & older)
Junior Dues	\$ 2.50	+	\$	1.75	=	\$	4.25		_		Total dues collected from Junior members (birth to 18 years old)
				our Unit D	ues a			l member.	This a	amount will b	pe reported to National for 2025
											or members. Any amount over the
amounts due to department are for the unit. Example: Total dues = \$42 sent \$18 to National \$17 to department and \$7 is for the unit.											
2025 Unit Dues Remittance Name and Address Enter below the name of the individual in the Unit to receive membership dues.											
Enter below the name of the maintain the onit to receive membership dues.											
Unit Membership Chairman:											
Address:											
	City							State	د	7in	Code
	O.LY										
I	Phone :							Cell #:_			
	Email:										
Lundersta	nd that the d	ues a	mount	t listed abo	ove ar	nd rem	nit-to-addı	ess will be i	orinted	d on the 202	5 membership renewal notice sent
											ges in the amount of Unit dues or
the remittance address after the DEADLINE established by the Department and National Offices. DEADLINE to submit this form to the Department Office is May 1, 2024.											
					to the	рера	irtment O	nice is May	1, 202	<u> </u>	
S	Submitted by	,						C	ate		
Title											

<sup>\*</sup>Send one copy of completed form to the Department office and one copy to your District President