

MARINE CORPS LEAGUE AUXILIARY COVER SHEET

DEPARTMENT OF _____ **REGULAR & LIFE** LAST REPORT _____ **ASSOCIATE** LAST REPORT _____
 TREASURER _____ REPORTING _____ REPORTING _____
 ADDRESS _____ TOTAL _____ TOTAL _____
 CITY, STATE, ZIP _____ DATE _____

UNIT NAME	REGULAR			LIFE			ASSOCIATE			MISC.	
	NEW	RENEW	RI	NEW	RENEW	PNP	NEW	RENEW	BOND	MISC	

RECAP:

RENEWAL	_____	@ \$ 15.00	=	\$ _____
NEW	_____	@ \$ 15.00	=	\$ _____
REINSTATE	_____	@ \$ 15.00	=	\$ _____
ARREARS	_____	@ \$ 15.00	=	\$ _____
NEW LIFE	_____	@ \$ _____	=	\$ _____
INITIATION FEE	_____	@ \$ 5.00	=	\$ _____
RENEWING LIFE MEMBERS	_____	@ \$ 0.00		
PNP's RENEWING	_____	@ \$ 0.00		
TRANSFERS	_____	@ \$ 0.00		

SUB-TOTAL \$ _____

BONDS	_____	@ 3.50	=	\$ _____
MISCELLANEOUS	_____	@	=	\$ _____

BALANCE DUE: MONEY OWED TO NATIONAL \$ _____

ADD OR DEDUCT MONEY OWED PREVIOUSLY..\$ _____

CHECK NUMBER: _____ TOTAL..... \$ _____

NATIONAL HEADQUARTERS: _____ NATIONAL REC'D DATE: _____

SEND 2 COPIES TO NATIONAL
MAKE CHECKS PAYABLE TO NATIONAL HEADQUARTERS, MCLA, INC.