

Marine Corps League Auxiliary, Inc
UNIT COVER SHEET

UNIT _____

DATE _____

DEPT _____

EIN #/DATE FILED _____

INC # _____

UNIT TREASURER _____

Signature _____

ADDRESS _____

PHONE# _____

CITY/STATE/ZIP _____

EMAIL _____

REGULAR		ASSOCIATE		LIFE MEMBER		NEW LIFE		BOND	MISC	REINSTATE
NEW	RENEW	NEW	RENEW	LM	ALM	NLM	NALM			

RENEWED

REG _____ @ \$20 = \$ _____

ASSOCIATE _____ @ \$20 = \$ _____

REINSTATED _____ @ \$20 = \$ _____

(MUST PAY REG DUES + DUES FOR EACH YEAR DELINQUENT)

NEW

REG _____ AM _____

INITIATION FEE: _____ @ \$5 = \$ _____

NEW MEMBER DUES: _____ @ \$20 = \$ _____

NEW LIFE (FEE BY DOB)

NLM _____ @ \$ _____ = \$ _____

NALM _____ @ \$ _____ = \$ _____

TRANSFERS

REG _____ AM _____ LM/ALM _____

BOND _____ @ \$3.50 = \$ _____**DEPT DUES** _____ @ _____ = \$ _____**MISC** _____ = \$ _____

SUB TOTAL _____ = \$ _____

ADD OR DEDUCT MONEY OWED PREVIOUSLY _____ = \$ _____

BALANCE DUE _____ = \$ _____**CHECK NUMBER** _____

UNIT TREASURER: **SEND 2 COPIES** OF COVER SHEET AND TRANSMITTALS TO DEPT TREASURER. MEMBERS IN UNCHARTERED STATES: SEND 3 COPIES TO NAT'L HQ. RECEIPTED COPY WILL BE RETURNED. TRANSMITTALS FOR NAT'L DUES MUST GO THROUGH THE DEPT TREASURER, IF ONE EXISTS. UNIT TREASURERS: MAKE CHECKS PAYABLE TO DEPT of _____, MCLA. UNCHARTERED STATES: MAKE CHECKS PAYABLE TO NATIONAL HQ.

DATE REC'D AT DEPT _____**DEPT TREAS.** _____**NATIONAL HQ** _____

DATE REC'D HQ _____ DATE RECORDED HQ _____ RETURNED TO DEPT _____

National _____ Unit Receipted _____ Dept. Receipted _____ Div. VP Receipted _____ Unit _____

REPORT OF MEMBERS			
	LAST	TODAY	TOTAL
REG	_____	_____	=====
ASSOC	_____	_____	=====
LIFE	_____	_____	=====
ALM	_____	_____	=====