

## MEMBERSHIP TRANSMITTAL REPORT # \_\_\_ for 20\_\_\_

Enclosed is Check # \_\_\_\_\_, totaling \$ \_\_\_\_\_ in payment of National and Department dues **(\$39.00)** for the following members at Post # \_\_\_\_\_, located in \_\_\_\_\_, Wyoming.

Date \_\_\_\_\_

By: \_\_\_\_\_

Make check payable to: **The American Legion, Dept of Wyoming**  
 Send completed form to: **1320 Hugur Ave. Cheyenne, WY 82001**

*Please indicate after each member their category with a checkmark: R = Renewal, N = New Member*

NAME	MEMBERSHIP NUMBER	R	N
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			

*Use reverse side of this form if necessary.*      Previous number of members transmitted: \_\_\_\_\_

Number of members on this transmittal \_\_\_\_\_

**TOTAL MEMBERSHIP TO DATE** \_\_\_\_\_

NAME	MEMBERSHIP NUMBER	R	N
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			