



**DEPARTMENT OF NEW YORK  
POST DUES TRANSMITTAL**

POST# \_\_\_\_\_ POST NAME \_\_\_\_\_ DATE \_\_\_\_\_

TRANSMITTAL# \_\_\_\_\_ TRANSMITTED BY: \_\_\_\_\_  
MEMBER YEAR - (1,2,3,Etc.) TELEPHONE#: \_\_\_\_\_

MEMBER TYPE	#CURR YEAR CARDS		#LAST YEAR CARDS		#PRIOR YEAR CARDS		PRIOR YEARS PAID
TRADITIONAL							
NEW							
<b>TOTAL</b>	<b>A</b>	<b>+</b>	<b>A</b>	<b>+</b>	<b>A</b>	<b>=</b>	<b>TOTAL CARDS</b>
DEPARTMENT PER CAPITA (PER MEMBER)	<b>B</b> \$32.50		<b>B</b> \$32.50		<b>B</b> \$32.50		
COUNTY PER CAPITA (PER MEMBER)	<b>C</b> \$		<b>C</b> \$		<b>C</b> \$		
<b>TOTAL Cards x Dept+County</b> <b>A x (B + C)</b>	<b>\$</b>	<b>+</b>	<b>\$</b>	<b>+</b>	<b>\$</b>	<b>=</b>	<b>TOTAL DUE</b> <b>\$</b>
<b>CHECK #</b>	<b>PREVIOUS UNDERPAYMENT</b>		<b>PREVIOUS OVERPAYMENT</b>		<b>TOTAL \$ THIS TRANSMITTAL</b>		
<b>#</b>	<b>\$</b>		<b>\$</b>		<b>\$</b>		

\* PLEASE MAKE CHECK PAYABLE TO: THE AMERICAN LEGION, DEPARTMENT OF NEW YORK  
PLEASE SEE INSTRUCTIONS AND NOTES ON THE BACK OF THIS FORM

PLEASE SEND ONE COPY TO DEPARTMENT, COUNTY AND RETAIN ONE FOR YOUR POST

## EXPLANATIONS

Traditional Member: A continuous annual renewal, including transfer in members from other Posts  
New: A member who was not a member in the previous membership year.

Prior Years: The back dues from a member being paid to maintain continuous years membership. Please list the back year dues being paid.

## PLEASE NOTE

Do not send Department Record Cards for members whose dues are not being paid with this transmittal.  
(Cards marked as "Deceased" and "Unknown" may be sent in the same envelope, but please keep separate from renewal cards.)

Do not send Department Record Cards for members who are transferring into your Post, unless their annual membership dues are being remitted at this time.

Do not send Department Record Cards for members who are applying for Paid-Up-For Life membership, unless their annual membership dues are being remitted at this time.

Do not combine Department dues transmitted with Paid-Up-For Life fees. All Paid-Up-For Life fees must be made payable to: National Treasurer, The American Legion.

Do not annotate changes of address on the Department Record Card, National Headquarters will not accept address changes written on the cards. Please use a Member Data Form for all address change

MAIL COMPLETED FORM AND DEPARTMENT RECORD CARDS WITH PAYMENT IN FULL TO:

The American Legion, Department of New York  
Att: Membership Processing  
112 State Street Suite 1300  
Albany, NY 12207

If there are any questions, please contact Department Headquarters at:  
(800) 332-6632 or (518) 463-2215  
e-mail: [info@nylegion.org](mailto:info@nylegion.org) internet: [www.nylegion.org](http://www.nylegion.org)