AMERICAN GI FORUM OF THE UNITED STATES

Clear

Women Transmittal Form

Local Chapter: _____ Local Chair: _____ Telephone: _____ Date: _____
Address: _____ City: _____ State: _____ Zip Code: _____

Instructions: Please list names, addresses, and dues under the proper column. Retain on copy for local files and mail original and duplicate to the STATE TREASURER. Make the check payable for the total to the American GI Forum of your State and mail to the STATE TREASURER. A completed membership application for each member listed must accompany this form.

Name Address City Zip Phone #	New	Renewal	Veteran	Non-Vet	Women Nat'l Dues	State Dues	Chapter Dues	Lifetime Nat'l Dues $250.00	Donate
Total	0	0	0	0	$0.00	$0.00	$0.00	$0.00	$0.00

LOCAL CHAPTER'S: Check # _____ Amt $0.00 Date Mailed: _____

State Check #: _____ Amt $0.00 Date Mailed: _____

Total $0.00

Original - National Office _____
1st Copy - State Office _____
2nd Copy - Local Files _____