

AMERICAN LEGION DUES TRANSMITTAL

Post name \_\_\_\_\_ Post # \_\_\_\_\_  
\_\_\_\_\_, Kansas  
Date \_\_\_\_\_

TO: Department Finance Officer, The American Legion  
1314 SW Topeka Blvd., Topeka, Kansas 66612-1886

Dues for 20 \_\_\_\_\_ New and \_\_\_\_\_ Renewal @ \$35.00 \_\_\_\_\_  
\_\_\_\_\_ KS Life Member (KLM) @ \$18.50 \_\_\_\_\_

Less Credit:

On-Line Credit (OLC) \_\_\_\_\_

Overpayment (OPC) \_\_\_\_\_

Add: Underpayment \_\_\_\_\_

Total Amount Transmitted by Check No. \_\_\_\_\_

\_\_\_\_\_  
Post Officer

LETTER OF ACKNOWLEDGMENT

\_\_\_\_\_, Kansas

This will acknowledge receipt of your Dues Transmittal of \_\_\_\_\_, 20 \_\_\_\_\_

containing \$ \_\_\_\_\_ As National and/or Department Dues for \_\_\_\_\_ KLM \_\_\_\_\_ New and

\_\_\_\_\_ Renewal members of your Post, together with \_\_\_\_\_ Department Record Cards.

Your membership total is now \_\_\_\_\_ Transmitted by Check No. \_\_\_\_\_

Thank You,

\_\_\_\_\_  
Michelle Johnston, Membership Secretary  
membership@ksamlegion.org  
785-232-9315

RETURN ACKNOWLEDGMENT TO:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

POST - Always fill out return address