**SONS OF THE AMERICAN LEGION**

 **Squadron #**

 **, Kansas**

 **Date** \_\_\_\_\_\_\_\_\_\_\_\_

To: Department Finance Officer, The American Legion

1314 SW Topeka Blvd, Topeka, KS 66612-1886

Dues for 20 New and Renewal Members @ **20.00** $

Add shortage from previous transmittal

Less credit from previous transmittal

Total Amount Transmitted by Check # $

 Squadron Officer

. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

**LETTER OF ACKNOWLEDGMENT**

Squadron Officer, Sons of The American Legion.

 , Kansas

This will acknowledge receipt of your Dues Transmittal of , 20 containing $ as National and Department Dues for New and Renewal members of your Squadron, together with Detachment Record Cards. Check #\_\_\_\_\_\_\_\_

Thank you,

RETURN ACKNOWLEDGMENT TO:  Michelle Dennison, Membership Secretary

 membership@kansaslegion.org

Name Phone # 785-232-9315

Address

City, State, Zip

 ***Always fill out return address***