



Unit Data Form Direct Billing

(Type or Print using Black Ink)

Non-legible forms will be returned

I understand that the dues amount listed below will be printed on the upcoming Membership Renewal Notices that will be mailed to each Senior member of our Units from our National Organization. Below is the address to be printed on each Renewal Notice showing where your members are to mail their dues for this Unit.

DEPARTMENT OF TEXAS	Division _____	District _____	Unit _____
20 _____	Senior Dues of the Unit are \$	_____	per member
20 _____	Junior Dues of the Unit are \$	_____	per member
Name of individual in the Unit to receive Membership Dues <small>(Current year dues of the member must be paid)</small>		Membership ID Number	
Address		City	Zip
Area Code & Telephone Number		Email Address	
Unit Name: _____			
Unit Mailing Address		City	Zip

Signature _____ Title _____ Date _____

Please note all information must be completed. It is imperative that this data form be returned no later than April 15th of the current year. Not doing so may cause next years renewal notices to be sent with the incorrect amount. Please send in this form even if the amount/or information did not change.

Unit making changes after May 15th, will be charged a \$30 processing fee.

Return the complete form by mail or scan and email to the Department Secretary.

**American Legion Auxiliary Department of Texas
PO Box 1629
Little Elm, Texas 75068-1629
Email: secretary@alateexas.org**