

# AMERICAN LEGION AUXILIARY

## List of Services

The following services may be ordered through the Department Office.

Use this form to order. Keep a copy for your files.

### *Unit Roster*

**Charge**

<input type="checkbox"/>	As of Date of Request, Includes Member Names, Addresses, Id#, Last Year Paid	Unit # _____ Number of Members _____ \$1.50 per 40 Members (Minimum)	_____
--------------------------	--	--	-------

### *Department Unit 1000 Roster by Zip Codes*

<input type="checkbox"/>	As of Date of Request Includes Member Names, Addresses, Id#, Last Year Paid	Zip Codes: _____ _____	_____
		\$3.00 per Request	

### *Membership Transmittals for Current Year*

<input type="checkbox"/>	Complete Set of Unit Membership Transmittals in Unit File as of Date of Request	Unit # _____ \$1.00 per page	_____
--------------------------	---	---------------------------------	-------

### *Labels for Unit Members*

<input type="checkbox"/>	Address Labels for Unit Members as of Date of Request	Number of Unit Members _____ \$1.50 per 30 Labels (Minimum)	_____
--------------------------	---	--	-------

### *Americanism Essay Contest Rules Packet*

<input type="checkbox"/>	Current Year Rules as Available from Department Chairman	# of Sets _____ \$2.00 per Packet	_____
--------------------------	--	--------------------------------------	-------

### *Educational Scholarships Packet*

<input type="checkbox"/>	Current Year Applications Available after September 15	# of Sets _____ \$2.00 per Packet	_____
--------------------------	--	--------------------------------------	-------

### *Girls State Packet (Duplicate)*

<input type="checkbox"/>	Current Year Application Available after January 1	# of Packets _____ \$5.00 per Packet	_____
--------------------------	--	---	-------

### *Unit Mailing (Duplicate)*

<input type="checkbox"/>	Complete Unit Mailing	Month of Unit Meeting _____ \$5.00 per Month	_____
--------------------------	-----------------------	---	-------

### *Year-End Reports Packet (Duplicate)*

<input type="checkbox"/>	Current Year Reports Available after March 15	Unit # _____ District # _____ \$5.00 per Set	_____
--------------------------	---	--	-------

**Total of Charges** \_\_\_\_\_

**Mail Form and Check to:**  
AMERICAN LEGION AUXILIARY  
Department of California  
401 Van Ness Avenue, Room 113  
San Francisco, California 94102-4586

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Unit # \_\_\_\_\_ District # \_\_\_\_\_ Date \_\_\_\_\_