



Dues Recap Form

Sons of AMVETS Department of Ohio

This form must be completed and returned with D&R

Squadron : _____ Date Issued: _____

Preprint Cards

_____ Beginning Number of Cards (balance of previous recap form)
_____ Renewals (Nat/Dept portions of preprints attached **@\$24 each**)
_____ Life Preprints Attached Complete Card (No Charge)
_____ Transferred Members Preprints Attached Complete Card (No Charge)
_____ Deceased Members Preprints Attached Complete Card (No Charge)
_____ Attach Deceased Member Form
0 Total Number of Cards Attached
0 Total Number of Cards Still In Your Possession
Always count your cards for verification
_____ Total Number of Cards Returned to Dept
No later than June 1st Each Year

Members without Preprint Cards

_____ Renewals - no preprints attached **@\$24 each**
_____ New Members - no preprints attached **@\$24 each**
0 Total Number of Annual Pay Members with this Dues Recap Form

0 Total Amount of money enclosed (members/\$24 each)
You Must Ship Membership At Least Once A Month
Do Not Hold Membership!!!

Signature : _____ Office: _____

Send To:

Sons of AMVETS Department of Ohio

960 Checkrein Ave

Columbus, Ohio 43229

Phone: 614-985-3380 Fax: 614-985-3381

Email: ohiosons@ohsonofamvets.org