

MARINE CORPS LEAGUE

MEMBERSHIP DUES TRANSMITTAL & CHANGE NOTIFICATION FORM

FROM: Adjutant/Paymaster of _____

Detachment # _____

TO: National Adjutant/Paymaster, PO BOX 3070 MERRIFIELD VA 22116

VIA: Department Paymaster

Date _____

PLEASE READ CAREFULLY

1. PLEASE TYPE OR PRINT NEATLY AND LEGIBLY.
2. Enclose separate dues payment checks; one (1) payable to National HQ, MCL, Inc. and one (1) payable to your Department.
3. Include Date of Birth for all NEW applicants (mandatory for PLMs).
4. Utilize two entries (Old and New) to change a member's address or to correct or change a member's name (COA Code).
5. STAPLE ORIGINAL-SIGNED APPLICATION FORMS TO TOP COPY (applications cannot be accepted without attached application forms).
6. Detach and retain bottom copy – Forward balance to Department
Department – retain bottom copy and forward balance to National HQ

Transmittal # _____
(Start new sequence on July 1 each fiscal year).

MEMBER #	CODE(S)	HQ USE ONLY	LAST NAME (JR, etc).	FIRST	MI
PLM #	STREET ADDRESS (or PO BOX #)			CITY	ST ZIP + 4
TELEPHONE NUMBER		E-MAIL ADDRESS			DATE OF BIRTH
MEMBER #	CODE(S)	HQ USE ONLY	LAST NAME (JR, etc).	FIRST	MI
PLM #	STREET ADDRESS (or PO BOX #)			CITY	ST ZIP + 4
TELEPHONE NUMBER		E-MAIL ADDRESS			DATE OF BIRTH
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PLM #	STREET ADDRESS (or PO BOX #)			CITY	ST ZIP + 4
TELEPHONE NUMBER		E-MAIL ADDRESS			DATE OF BIRTH

National dues only Check # _____

Code

R ___ Renewal @18= \$ _____

N ___ New Member @23= _____

RAM ___ Renewal Associate @18= _____

NAM ___ New Associate @23= _____

RDM ___ Renewal Dual @18= _____

NDM ___ New Dual @23= _____

Life Member by age:

L ___ 35 and under @ 500 _____

L ___ 36 to 50 @ 400 _____

L ___ 51 to 60 @ 300 _____

L ___ 61 and over @ 150 _____

Total National Dues \$ _____

Department Dues	SIGNED _____ DETACHMENT ADJUTANT / PAYMASTER
Check # _____	PRINTED NAME _____
Total \$ _____	ADDRESS _____
Received at Department	CITY _____ ST _____ ZIP + 4 _____
Date: _____	NATIONAL HEADQUARTERS ONLY
Received at National HQ (Date/Time Stamp)	PINS _____ INV _____