



# PAYMASTER GUIDEBOOK

**AUGUST 1, 2020**

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**Department of Kansas ADJ / PAYMASTER**

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- i. ALL MCL PAYMASTER FORMS ARE ON THE MCL NATIONAL WEBSITE IN THE LIBRARY
- ii. ALL FORMS ARE IN .PDF FORMAT & SHOULD BE FILLED OUT ON A COMPUTER
- iii. THEY SHOULD BE DOWNLOADED EACH TIME ONE IS NEEDED TO ENSURE YOU ARE USING THE MOST CURRENT
- iv. PAYMASTERS WILL NEED A COMPUTER & INTERNET ACCESS MOVING FORWARD
- v. MEMBERSHIP YEARLY DUES ARE TO BE PAID BY SEPTEMBER 1
- vi. **MEMBERS ARE VETTED UPON RECEIPT OF APPLICATION BY DETACHMENT**
- vii. **MEMBERS ARE CONSIDERED IN GOOD STANDING AS OF DATE DUES AND TRANSMITTAL ARE RECEIVED BY DEPARTMENT PAYMASTER.**

# PAYMASTER GUIDEBOOK

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## Section 1 – Purpose of the Guide

### The purpose of this guide is:

1. To have all Paymasters understand their duties to the Detachment and the Department.
2. To have all Paymasters reporting the Transmittals in the same manner.
3. To be a reminder on the proper way of filling out Transmittals for all Paymasters.
4. To organize the submitting of Transmittals to make it easier on both the Department Paymaster and National Headquarters.
5. To clearly identify the requirement to submit an annual IRS Form 990.
6. To clearly identify the requirement to keep your State Incorporation current by submitting a Kansas Secretary of State
7. To clearly identify the requirement to submit an annual Paid Life Member (PLM) Audit.

To be a guide for all Paymasters presently and in the future. Your input, positive and negative, is desired. If this guide can be improved upon in any way, shape or form, it would be greatly appreciated. Contact let your Dept Paymaster know.



*Thanks go out to the Department of Nebraska, Department of Illinois & the Department of West Virginia who have similar guides or training packets Those documents provided the inspiration and a way forward in creating this Guidebook. Special thank you to Harvey Harris, Department of Kansas Adj/Paymaster for his contributions and document review.*

## Section 2 – Duties of the Paymaster

- 1. Maintains Detachment Financial Records:** The Paymaster is responsible for maintaining and providing for review upon request from the Detachment Board of Trustees, Audit Committee, and/or Department/National offices, all financial records and reports for the Detachment. Such records normally include records of revenue receipts, expenditure records, checking and financial account statements and summary reports of financial condition (balance sheet, profit and loss, cash flow, etc.). As a matter of practice, reports of financial condition should be made and reviewed by Detachment officers and/or membership on a scheduled periodic basis.
- 2. Acts As Controller Of Detachment Funds:** Shall keep a true record of all monies received and expended by the Detachment and, in close operation with the Adjutant, prepares up-to-date record of dues paid by the membership and forwards notices to members of their dues who have lapsed and also such other duties as may be assigned to him or her by the Detachment Commandant. On the Detachment banking accounts, the Paymaster should always be the primary signer. The Paymaster is responsible for paying authorized bills, assures the legitimacy of payment requests, budget and/or board of trustee's approvals, prior to releasing funds for disbursement. He/she is also responsible for assuring that proper documentation accompanies requests for payments in the form of invoicing/billing, receipts and approval. This office acts as the policeman for outflows and expenditures on behalf of the Detachment's membership. He/she, therefore, has the right to question expenditures, if necessary, not clearly understood by budget or board of trustees. The Paymaster should always present a question to the Board of Trustees if there is any doubt about disbursement.
- 3. Makes Fiscal and Financial Reports at Meetings:** Keeping officers and members informed as to financial status is important to establishing and maintaining credibility within the organization. The presiding officer should call on the Paymaster for a report at each business meeting. This report should summarize financial transactions since the last meeting and provide a balance of accounts. It is suggested that at least

quarterly the Paymaster report to the Board of Trustees in more detail on account status, and provide balance sheet, profit and loss and cash flow data in writing. By doing so, the officers are aware of status and trends in determining requirements for revenue and/or changes in expenditures. Financial reports by the Paymaster should be written. **Financial reports are not approved at Officer or Membership meetings, they are filed. The final year end audit validates all financial reporting and records are in sync.**

4. **Receives Dues and Forwards Transmittals:** This job can be shared by the Adjutant, or handled by the Paymaster in its entirety, based on practicality and Detachment practices and procedures. It is extremely important to handle dues and membership transmittals in an expeditious manner. This will be the first impression a new member has of the Marine Corps League to assure timely receipt of the member's card and lapel pin. Dues should be transmitted upon receipt during the month and immediately after a meeting where a new member join. It is acceptable to have only one name on a Transmittal Form. It is equally important that the transmittal forms are done accurately, and the money is forwarded in compliance with Department and National procedures. It is important to review the transmittal instructions, as well as any procedures and policies, distributed by Department and National. This will help assure the goal of timely response for membership cards and pins.
5. **Handles Tax and Licensing Functions:** Because each Detachment should be incorporated within the state, there will normally be annual forms to be completed from State and/or Federal tax agencies. These forms will request financial data regarding revenues and disbursements and their primary purpose is to assure that the organization is conforming to the articles of incorporation for a Veterans non-profit organization. The Paymaster is responsible for completing and filing the required information accurately and timely. The Internal Revenue Service (IRS) requires all Marine Corps League Detachments to file an IRS Form 990 or Form 990-N e-Postcard.

6. **The Paymaster collates / packages financial documents of Detachment for the Detachment year-end Detachment Audit.** Package to be turned over to Audit committee; Detachment Expense Receipts, Check book, Bank account register for year, Detachment Monthly Budget / Income / Expense tracker.

**All checks written must have a receipt before payment.**

**IMPORTANT: Each Receipt received for payment should contain; Purchasers name, Date of purchase, Purpose of purchase, and Detachment Check number.**

Visit Detachment Documents on MCL National website “Detachment Guidebook” – page 62 for duties of Paymaster.

<https://www.mcleaguelibrary.org/>

## Section 3 – Completing the Transmittal

Each section of the Transmittal will be shown to you as it is discussed. Numbers will be on the section of the Transmittal to correspond with the number explaining what to do and how to do it. An electronic copy of the Transmittal Form which you can type into is located on the National Website. **Download to your personal computer for your use each time you need a transmittal form to ensure you are using the most current form. When complete save to your computer.**

[www.mcnational.com](http://www.mcnational.com) or [www.mcleaguelibrary.org](http://www.mcleaguelibrary.org)

<b>MARINE CORPS LEAGUE</b>	
<b>MEMBERSHIP DUES TRANSMITTAL &amp; CHANGE NOTIFICATION FORM</b>	
<b>FROM:</b> Adjutant/Paymaster of _____ <b>1</b>	Detachment # _____ <b>2</b>
<b>TO:</b> National Adjutant/ Paymaster, 3619 Jefferson Davis Hwy Suite 115 Stafford VA 22554	Date _____ <b>3</b>
<b>VIA:</b> Department Paymaster <i>PLEASE READ CAREFULLY</i>	Transmittal # _____ <b>4</b>
<small>1. PLEASE TYPE OR PRINT NEATLY AND LEGIBLY.</small>	
<small>2. Enclose separate dues payment checks; one (1) payable to National HQ, MCL, Inc. and one (1) payable to your Department</small>	
<small>3. Include Date of Birth for all NEW applicants (mandatory for PLMs).</small>	
<small>4. STAPLE ORIGINAL-SIGNED APPLICATION FORMS TO TOP COPY (applications cannot be accepted without attached application forms).</small>	
<small>5. You may use a supplemental spreadsheet if you have more than six members renewing at one time. Please include all information needed from this form.</small>	
<small>(Start new sequence on July 1 each fiscal year).</small>	

1. On the line after where it states “**FROM:** Adjutant/Paymaster of \_\_\_\_\_”

Place the name of the Detachment.

2. On the line after where it states “Detachment # \_\_\_\_\_”

Place the number of your Detachment.

3. On the line after where it states “**Date** \_\_\_\_\_”

Place the date which you have completed the transmittal. The date whatever date you are doing the transmittal. NOTE: It is best to match the Date on the Transmittal with the Date on the Checks you write. And date you mail it to your Department.

4. On the line after where it states “**Transmittal #** example 1025-19-001-002 ”

**Detachment # (4 digits) - Fiscal Year (2 digits) – Transmittal # (3 digits) – Pages in Transmittal Batch (3 digits)**

Each transmittal should have its own separate set of checks (i.e. 1 each for National HQ’s and the Dept of Kansas). This may seem cumbersome, but if a Transmittal is lost and the check was cashed, it can assist the Department and National HQ’s to see where the breakdown occurred. **Note last page of Transmittal batch contains the financial dues data.**

ENTER: IF Member Paying Dues

MEMBER # <b>5</b>	CODE(S) <b>6</b> HQ USE ONLY <b>7</b>	LAST NAME (JR.etc.) <b>8</b>		FIRST	MI	# of Years Paying
PLM # <b>9</b>	STREET ADDRESS (or PO BOX #) <b>10</b>		CITY <b>11</b>	ST <b>12</b>	ZIP + 4 <b>13</b>	Prior Expiration
TELEPHONE NUMBER <b>14</b>	E-MAIL ADDRESS <b>15</b>			DATE OF BIRTH <b>16</b>		

- It is always necessary to place in the box that is titled “**MEMBER #**”, the current membership number of the member. Each member has a number that has been issued by National Headquarters. All Assoc. Members begin with the letter “X” (i.e.X123456)
- In the box that is titled “**CODE(S)**” “**COAO**” if the member has a Change of Address. “COAN” will require 2 lines on the form, one for the old address (list 1st) and one for the new address (list 2nd, underneath the old address). **Fill all Fields of both entries. Codes as of 02/13/2019**

**N:** New Member Paying Full Dues Between the July 1st and the last day of February.

**NAM:** New Assoc. Member Paying Full Dues Between the July 1st and the last day of February.

**NEW MEMBERS – SUBMIT SIGNED MCL APPLICATION w/ TRANSMITTAL.**

**R:** Renewal of a Regular member.

**RAM:** Renewal of an Associate Member.

**NDM:** New Dual Member Paying Full Dues Between the July 1st and the last day of February.

**N\*:** New Member Paying Reduced Dues Between the March 1st and the June 30th.

**NAM\*:** New Associate Member Paying Reduced Dues Between the March 1st and June 30th.

**NDM\*:** New Dual Member Paying Reduced Dues Between the March 1st and June 30th.

**IMPORTANT: IF USING ABOVE CODES FILL IN # of Years Paying box**

**R/I:** Reinstatement of a member. Must have been expired by at least one year.

**HAD:** Honorary Active Duty Member

**H:** Honorary Member

**COAO:** Change of address fill in address before change. (Required 2 lines COAO & COAN)

**COAN:** Change of address fill in new address. (Required 2 lines COAO & COAN)

**CON:** Change of name.

**T:** Transfer, the proper MCL form filled out and signed must accompany the transmittal.

**DEL:** Delete This can only be done with members who are passed the two-year drop point or with accompanying letter stating to terminate membership signed by the member.

**NOD:** Enter Date of Death, in **Address Line enter actual Date of Death. Note Chaplain still fills out and submits MCL Notice of Death report separately.**



7. **HQ USE ONLY** Do not write in this box, it is reserved for National HQ use only.  
NOTE: When you receive your copy back from National HQ after it has been inputted into their computer, it will have the expiration date of the member in this location.
8. In the box that is titled **“LAST NAME (JR, etc.) FIRST MI”** place the members Last Name under the “LAST NAME (JR, etc.)” section, the members First Name under the word “FIRST” and the members Middle Initial under the “MI” section. Name should match membership name, no alias or nicknames.
9. In the shaded box that is titled **“PLM #”** is reserved for National HQ use only. Do not put anything in this box. If a person becomes a Paid Life Member (PLM), this is where National HQ will place his/her life membership number.
10. In the box titled **“STREET ADDRESS (or PO BOX #)”** place the member’s residence of their official mailing address. Include the Apartment # here.
11. In the box titled **“CITY”** place the member’s city or town name.
12. In the box titled **“ST”** place the member’s two letter State Code (NE).
13. In the box titled **“ZIP + 4”** place the member’s five-digit zip code PLUS the four digits for his/her location within the zip code area. The Zip+4 can be obtained on the official Post Office website [www.usps.com](http://www.usps.com), just click on “Look up a ZIP Code” (If applicable, if not please use fill in the +4 with 0000 i.e. 68025-0000).
14. In the box titled **“TELEPHONE NUMBER”** place the member’s primary phone number.
15. In the box titled **“E-MAIL ADDRESS”** place the members email address (if the member has one).
16. In the box titled **“DATE OF BIRTH”** place the members Date of Birth. This is only required for New Members and Life Members. The Life Members age is the determining factor to what dollar amount the Life Member is required to pay.

**IMPORTANT DOUBLE CHECK MEMBER # & PLM # ARE CORRECT**

NATIONAL DUES ONLY			Check #	0001
R	1	Renewal @20.00		20.00
N	2	New Member @ 25.00		50.00
RAM		Renewal Associate@20.00		0.00
NAM		New Associate @25.00		0.00
RDM		Renewal Du @20.00		0.00
NDM		New Dual @25.00		0.00
N*		March 1st-August 30th @15.00		0.00
NAM*		March 1st-August 30th @15.00		0.00
NDM*		March 1st-August 30th @15.00		0.00
Life Member by age:				
L		35 and under @ 500		0.00
L		36 to 50 @ 400		0.00
L	1	51 to 64 @ 300		300.00
L		65 and over @ 200		0.00
National Dues \$				370.00

Shaded area are for National HQ use only.

17. In the section titled "Check #", place the number of the check that you wrote to National HQ. Send only ONE (1) check to National per Transmittal payable to "National HQ, MCL, Inc".

18. In the sections next to each "Code" there is a line. Place the number of members, one for each completed line on the transmittal. (i.e. EXAMPLE 2, 1 Renewal, 2 New members, 1 Life 51 to 64).

19. In the sections under the \$ column, enter the dollar amount by multiplying the number of members for each letter by the amount after the explanation of the letter. (i.e EXAMPLE 2, 2 New Members (N) x 25.00 = 50.00, 1 Renewal (R) x 20.00, 1 Life 51 to 64 = \$300.00) NOTE: If you are using the Official Transmittal located in the National Website's Library the PDF Form automatically do the math for you, just type in how many of each.

20. In the section titled "National Dues" place the totals from section 19. This is Total National Dues that should be submitted on your check to National (line 17). NOTE: If you are using the Official Transmittal located in the National Website's Library it will automatically do the math for you.

Department Dues		SIGNED DETACHMENT ADJUTANT / PAYMASTER
Check #	0002	PRINTED NAME
Total \$	\$15.00	ADDRESS
Received at Depart		CITY ST ZIP + 4
Date:		DEPARTMENT PAYMASTER NAME
Received at National HQ (Date/Time Stamp)		EMAIL PHONE NUMBER
T=Transfer		
HAD=Honorary Active Duty		
H=Honorary		
COAN=Change of Address(NEW)		
AO=Change of Address (OLD)		

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- In the section titled "**Check #**", place the number of the check that you wrote to National HQ. Send only ONE (1) check to National per Transmittal payable to "National HQ, MCL, Inc".
- In the sections next to each "**Code**" there is a line. Place the number of members, one for each completed line on the transmittal. (i.e. EXAMPLE 2, 1 Renewal, 2 New members, 1 Life 51 to 64).
- In the sections under the **\$ column**, enter the dollar amount by multiplying the number of members for each letter by the amount after the explanation of the letter. (i.e EXAMPLE 2, 2 New Members (N) x 25.00 = 50.00, 1 Renewal (R) x 20.00, 1 Life 51 to 64 = \$300.00) NOTE: If you are using the Official Transmittal located in the National Website's Library the PDF Form automatically do the math for you, just type in how many of each.
- In the section titled "**National Dues**" place the totals from section 19. This is Total National Dues that should be submitted on your check to National (line 17). NOTE: If you are using the Official Transmittal located in the National Website's Library it will automatically do the math for you.

21. In the section titled Department Dues “**Check #**” place the number of the check that was written to the Department of Kansas. Payable to: Department of Kansas – MCL

In the section titled Department Dues “**Total \$**\_\_\_\_\_”, place the amount of the check written to the Department of Kansas. Department Dues are \$5.00 per new or renewing member **NOTE: Life Members do not pay the \$5.00 to the Department, nor any additional Detachment dues.**

The **Department Paymaster** will place the date he/she receives and processes the Transmittal.

**National HQ** will place a date here when they receive and process the Transmittal.

22. In the last section titled “**SIGNED DETACHMENT ADJUTANT/PAYMASTER**” place the signature of the Paymaster or the Adjutant / Paymaster.

In the section titled “**PRINTED NAME**” print clearly the name of the Paymaster or Adjutant / Paymaster = **to current person on ROI.**

In the section titled “**ADDRESS**” place the street address or PO Box # of the Paymaster or Adjutant / Paymaster = **to current person on ROI**

In the section titled “**CITY ST ZIP + 4**” place the city or town, State and Zip+4 of the Paymaster or Adjutant / Paymaster = **to current person on ROI.**

In the Section titled “**Department Paymaster Name**” please enter Department Paymaster’s Name, eMail and Phone Number. It will fit inside the little provided box digitally when creating the transmittal then the paymaster trying to hand write it.

**ALL BOXES MUST BE FILLED IN**

**ALL Transmittals & Checks sent to the Department Paymaster.**

## Section 4 – Completing the Request for Transfer Form

1. The Request for Transfer Form has TWO purposes.
2. To Transfer a member from one Detachment to another Detachment. He/she is no longer a member of the old Detachment.

To Transfer voting rights at the Department and National level. This is when a Member joins more than one Detachment. A Dual Member normally holds voting rights at whichever Detachment he/she joined first. A member **MUST** execute a Request for Transfer, Section 4 to update their voting rights to a new Detachment.

3. NOTE: An electronic copy of the Request for Transfer Form which you can type into is in the National Website's Library. It can be downloaded to your personal computer for your use.

### Filling out the Request for Transfer Form

**Part 1** – This section is **TO BE COMPLETED BY THE MEMBER**. The member must sign and date Part 1 and then provide the signed document to the Losing Detachment Commandant.

**Part 2** – This section is **TO BE COMPLETED BY THE LOSING DETACHMENT**. The Losing Detachment Commandant must verify that the member is in good standing and not indebted to the Detachment. Please circle either "is" or "is not" in the (is/is not) section. The Commandant must also provide the membership expiration date or note Paid Life Member (PLM) status in place of the expiration date. The Losing Commandant should sign and date the document. The Losing Detachment Commandant can either provide the Request for Transfer back to the member to hand carry to the new Detachment OR mail it to the Gaining Detachment's Official Mailing Address or Gaining Detachment Commandant's home address.

**Part 3** – This section is **TO BE COMPLETED BY THE GAINING DETACHMENT**. The Gaining Detachment Commandant must approve or disapprove the Transfer. **It is recommended that the new Detachment vote on ALL transfer members. Transfers shall not be automatic until they are reviewed by the membership, DD-214/Discharge verified and voted on.** Once the Transfer Member is approved by the Gaining Detachment, the Commandant should sign and date the Request for Transfer Form. The Commandant should then provide the Request for Transfer Form to the Gaining Detachment Paymaster so he can include it with his/her next Transmittal submission.

**Part 4** – This section is **FOR DUAL MEMBERS ONLY** and should only be completed if the member intends to move his/her voting rights at Department and National Conventions to a new Detachment. The member should also fill out most of Part 1 (Name, Member #, PLM # [if applicable], Address, Phone, D.O.B).

*Request for Transfer EXAMPLE on the following page.*

**The Original Request Form Transfer Form MUST accompany a Transmittal**



# MARINE CORPS LEAGUE REQUEST FOR TRANSFER

1. Printed Name Lewis Burwell Puller Member # 000001 PLM # 000001  
Street 75 Kemper Drive Apt #   
City Hampton State VA Zip +4 66345  
SSN 454-34-2098 Tele# (714) 894-23456 Date of Birth 06/26/1898  
Date of Enlistment/Commissioning 06/01/1918 Date of Discharge/Separation/Retirement 06/01/1955  
I hereby request that my membership as a ☒ Regular Member ☐ M-A-L ☐ Dual Member ☐ Associate Member,  
in the Dan Daly Detachment # 1,114 be transferred to the General Larry Oppenheimer  
Detachment # 1,025 Department of Kansas as a ☒ Regular Member ☐ Dual  
Member ☐ Associate Member or to ☐ M-A-L status.

Sign & Date

Signature

Date

2. TO BE COMPLETED BY THE LOSING DETACHMENT (Det. No. 1,114)  
The above member is in good standing ☒; delinquent ☐. Membership expiration date is  
Life Member  
Member (is/is not) indebted to this Detachment. (If indebted, please explain on reverse side). The transfer of this  
member is approved ☒ disapproved ☐.

Sign & Date

Signature of Commandant

Date

3. TO BE COMPLETED BY THE GAINING DETACHMENT (Det. No. 1,025)  
I have reviewed the foregoing information and hereby approve ☒; disapprove ☐ of the transfer of this member.

Sign & Date

Signature of Commandant

Date

☐ FOR DUAL MEMBERS ONLY  
I certify that I am a Dual Member and I hereby request that my voting rights for Department and National  
Conventions be transferred to  Detachment #  Department of

Signature of Dual Member

Date

Member requesting transfer:

## INSTRUCTIONS (Type or print legibly)

Complete all information in #1 and #4 (if applicable) above. Sign and date the application in space provided. Forward the form to your current Detachment Commandant for approval.

Losing Detachment Commandant:

Complete the appropriate information in #2. Sign and date the form in the space provided. Retain one copy for Detachment records and forward the original and two copies to the gaining Detachment Commandant. Send one copy to your Department Paymaster for information purposes.

Gaining Detachment Commandant:

Complete # 3 as appropriate. Sign and date the form in the space provided. Retain one copy. Forward the original and remaining copy to the Department Paymaster, along with Dues Transmittal Form listing the transferring member.

Department Adjutant/Paymaster:

Retain bottom copy and forward the original to National Headquarters along with Dues Transmittal Form listing the transferring member.

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## Section 5 – Completing the Report of Officer Installation Form

The Report of Officer Installation Form should NOT be completed BEFORE the Installation takes place. **The Installing Officer should refuse to sign the document unless it is filled out completely.**

**NOTE 1:** An electronic copy of the Report of Officer Installation Form which you can type into is located on National Website's Library. **Download newest version each time you need to complete this form.**

On the line after where it states “**DET FEDERAL EIN:** \_\_\_\_\_”  
Place the Detachment's Federal Employee Identification Number (EIN). The EIN is unique to your Detachment and is what allows you to open a bank account (aka Tax Payer ID#). **VERY IMPORTANT IT IS ACCURATE & SAME AS LAST YEAR**

On the line after where it states “**DET INCORPORATION ID#** \_\_\_\_\_”  
Place the Detachment's Kansas State Incorporation Number. The INC # is unique to your Detachment. **VERY IMPORTANT IT IS ACCURATE & SAME AS LAST YEAR**

On the line after where it states “**DATE** \_\_\_\_\_” Place the Date of your Kansas State Incorporation Number. This is the Date your Detachment was originally incorporated in the State of Kansas

Follow the example on the following page but be sure to include the following:

- Detachment Name / Detachment #
- Date of Elections / Date & Place of Installation
- Installing Officer & Title
- Detachment Meeting Information
- Detachment Official Email **Address (NORMALLY COMMANDANT, suggest someone with computer able to share info same day. Checks daily)**
- Enter all Officers that are being Installed for the coming year.
- **Renewal Dues Amount (National HQ uses this \$ for Detachment Dues Renewal Notices)**
- Submitted by name & title (The person filling out the form)
- Signature of Installing Officer

**NOTE 2:** If you change Officers mid-year, especially if it is the Commandant OR Paymaster, you should file another Report of Officer Installation Form. This keeps the Department and National up to date and allows for the National to communicate with current person.

**ALL Report of Officer Installation Forms** will be forwarded to the Department Adj.



# Marine Corps League

## REPORT OF OFFICER INSTALLATION



DETACHMENT NAME	DETACHMENT #	DEPARTMENT OF
General Larry Oppenheimer	1025	Kansas

**FROM:**

TO: NATIONAL ADJUTANT PAYMASTER		DEPT FEDERAL EIN: 48-6118106
VIA: DEPARTMENT ADJUTANT		DEPT INCORPORATION ID # 1735174 DA 104/19/1990
DET FEDERAL EIN: 48-1217467	FOR DEPT INSTALL ONLY:	
DET INCORPORATION ID # 2813525	DATE 12/13/1999	

DATE OF ELECTIONS	DATE/PLACE OF INSTALLATION	INSTALLING OFFICER & TITLE	SIGNATURE OF INSTALLING OFFICER
03/27/2019	06/22/2019 VFW, Lenexa, KS	Harvey Harris, MWD V Commandant	<i>Signature of Installation Officer</i>

**DETACHMENT MEETING:**

DAY/DATE OF MEETING 4th Wednesday of Month	TIME 07:00	PLACE Isadore Hoehn VFW Post 7397
STREET ADDRESS 9550 Pflumm Road	CITY Lenexa, KS 66215	STATE KS
		ZIP

**E-MAIL OFFICIAL CORRESPONDENCE TO:** Ken Fain, Commandant - kenfain@gmail.com - 913.980.7464

Normally the Commandant. Needs to be someone who checks correspondence daily.

**FAX OFFICIAL CORRESPONDENCE TO:** ( ) MARK FOR THE ATTN: ( )

\*Note: The ADDRESS information called for in the following section does not necessarily refer to the Officer's personal mailing address, but rather the address at which the Officer will receive official correspondence from National and Department Headquarters. If the Department/Detachment has a single address, i.e. PO BOX, to which all official correspondence should be sent, list that address for all Officers. The officer MUST be installed to be listed on form.

OFFICE	INCUMBENT	PHONE NUMBER EMAIL ADDRESS	ADDRESS *See note above	CITY, STATE ZIP +4
COMMANDANT	Ken Fain	( ) (913) 980-7464 kenfain@gmail.com	9429 W 111th Terrace, KS 66210-1706	
SENIOR VICE COMMANDANT	Joe Hughes	( ) (913) 660-4817 jmhughes@everestkc.net	8021 Hall Street, Lenexa, KS 66219	
JUNIOR VICE COMMANDANT	Joel Wilson	( ) (816) 872-4997 wilsonjoel.1@gmail.com	2913 SE Jennifer Drive, Lee's Summit, MO 64063-9303	
JUDGE ADVOCATE	Chuck Cammack	( ) (913) 660-3719 chcammack@gmail.com	7911 Darnell Drive, Lenexa, KS 66215-6121	
JUNIOR PAST COMMANDANT		( )		
ADJUTANT PAYMASTER	Bill Clinton	( ) (913) 484-3078 bdclint@sbcglobal.net	11232 Pflumm Road, Lenexa, KS 66215-4811	
ADJUTANT		( )		
PAYMASTER		( )		
CHAPLAIN	Max Deweese	( ) (913) 381-0831	13060 Metcalf Ave #217, Overland Park, KS 66213-2603	
SERGEANT- AT ARMS	Steve Thomas	( ) (913) 636-3534 sthomas-mega@comcast.net	624 S Honeysuckle Drive, Olathe, KS 66061-4229	
WEB SERGEANT		( )		
		( )		

**RECOMMEND HOME ADDRESSES**  
That match member Transmittal submissions & Detachment Roster

Total **renewal** dues are \$ **35.00**. This amount is the total of Detachment, Department and National dues and will appear on the Direct Billing Notices.

SUBMITTED BY	TITLE	SIGNATURE	DATE
Bill Clinton	ADI / PAYMASTER	<i>Signature of Officer</i>	

### PLEASE READ CAREFULLY

Detach and retain bottom copy. Forward balance to Department Adjutant.  
Department retain bottom copy and forward original to National HQ  
and remaining copy to National Division Vice Commandant

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## Section 6 – Kansas Business Entity

A **Business Entity ID Number** is not the FEIN (Federal Employer Identification Number). The Kansas business entity ID number is assigned by the Secretary of State's office to operate a business in Kansas.

### Kansas Business Entity Record Search

<https://www.kansas.gov/bess/flow/main?execution=e1s4>

[Kansas.gov](#) | [State Phone Directory](#) | [Online Services](#)



### Business Entity Search Station (BESS)

Perform a Search

Welcome to the Business Entity Search Station (BESS) for the Secretary of State's office.


Below you will see a list of the various databases our office maintains, along with a brief description of each. Select the link to perform a search.

- [Business Entity Database](#) (view information for a business on file with the Secretary of State)
- [Name Availability](#) (check to see if a business name is available)
- [Charitable Organizations](#) (view information on registered charities in Kansas)
- [Trademark/Service-Mark Search](#) (view information for a Trademark/Service-Mark on file with the Secretary of State)

**Note:** The state of Kansas does not register sole proprietorships, d/b/a, assumed name, trade name or fictitious name entities. Therefore the Secretary of State cannot provide a Business Entity database. These are considered "live" and are updated with information every 10 minutes from the Secretary of State's office.

*Click*

[Kansas.gov](#) | [State Phone Directory](#) | [Online Services](#)



[Home](#) | [Contact](#) | [Feedback](#)

[Thinking](#) | [Starting](#) | [Maintaining](#) | [Closing](#)

### Business Entity Database Search

The search will bring back a maximum of 400 results. Please review the [Helpful Hints](#) section to learn more about searching by a business name.

Please note that the state of Kansas does not register sole proprietorships, d/b/a, assumed name, trade name or fictitious name entities.

Search:

- [By business entity name](#)
- [By business entity ID number \(not the FEIN\)](#)
- [By a keyword](#)
- [By a resident agent's full name](#)
- [By a resident agent's name: keyword](#)

**Note:** [K.S.A. 45-239](#) prohibits using names and addresses derived from public records for certain commercial purposes. This includes using public records to sell property or services. Please view the statute for more details.

Be advised the information contained as the "Business Summary" is for informational purposes only. It is not an official filing with the Secretary of State's office and should not be relied on as such. Please view the actual documents filed by customers with the secretary of State's office to ensure accurate information. When filing a Uniform Commercial Code statement on an entity, consult with your attorney to ensure the correct debtor name.

# Kansas Business Center

## Business Entity Search

### Search by Name

To search for a business by name please enter it in the space provided below.

Name of Business:

*Enter a Search Name / enter beginnig of specific name*

It may take up to 60 seconds for results to appear. Please be patient.

The business entity database is updated every 10 minutes - this is considered "real-time" data. Please visit [Helpful Hints](#) for assistance with a business name search.

# Kansas Business Center

Think!

## Business Entity Search

### Search Results

Searched: Marine Corps League

A maximum of 400 search results are displayed. Visit [Helpful Hints](#) if search assistance is needed.

Your search results are listed below. You may select a specific business to view more detailed information, as well as obtain a certificate or letter of good standing.

### Results

	Name	ID Number	Status
<input type="button" value="View Record"/>	MARINE CORPS LEAGUE INC. DET. 1025	2813525	ACTIVE AND IN GOOD STANDING
<input type="button" value="View Record"/>	MARINE CORPS LEAGUE, DEPT. OF KANSAS INC.	1735174	ACTIVE AND IN GOOD STANDING
<input type="button" value="View Record"/>	MARINE CORPS LEAGUE, EDWIN A SCHUMACHER DETACHMENT 740, INC.	2930154	ACTIVE AND IN GOOD STANDING
<input type="button" value="View Record"/>	MARINE CORPS LEAGUE, SOUTHEAST KANSAS DETACHMENT INC.	0997866	ACTIVE AND IN GOOD STANDING

*Click to view historical records*



## STATE OF KANSAS

OFFICE OF THE SECRETARY OF STATE

[Kansas Secretary of State](#)

[Kansas.gov Entity Search](#)

### BUSINESS ENTITY FILED DOCUMENTS

As part of our ongoing mission to be the least complicated, most accessible office in state government, we are proud to offer business entity documents online. Always review the actual document to ensure reliable information. Call our office at (785) 296-4564 if you experience any issues with this system, document errors, or would like certified copies of documents. We hope this system is useful and makes our office less complicated and more accessible.

Please read the following notice and check the box below if you agree to the terms:

K.S.A. 45-230 prohibits using names and addresses derived from public records for certain commercial purposes. This includes using public records to sell property or services. Persons are also prohibited from obtaining public records with the intention of making the records available to a third party for such purposes. Violation of this law is a civil offense punishable by fine. Violations will be referred to the Attorney General or district attorney for prosecution.

☒ "I declare that the information obtained from the records will not be used for a prohibited purpose."

Next



## STATE OF KANSAS


OFFICE OF THE SECRETARY OF STATE


[Kansas Secretary of State](#)










[Kansas.gov Entity Search](#)

### BUSINESS ENTITY FILED DOCUMENTS

Entity ID: 1735174 Entity Name: MARINE CORPS LEAGUE, DEPT. OF KANSAS INC.

 Document available online. To view the documents you may need to download [Adobe Acrobat Reader](#).

 Document not available online. Please contact the Kansas Secretary of State's office at 785-296-4564 for information on obtaining copies of those documents.

Document	Number of Pages	Date	Document Type
	?	07/2018	CHANGE OF RO OR RA
	1	12/2017	ANNUAL REPORT
	1	12/2016	ANNUAL REPORT
	1	12/2015	ANNUAL REPORT
	1	12/2014	ANNUAL REPORT
	1	12/2013	ANNUAL REPORT
	1	12/2012	ANNUAL REPORT
	1	12/2011	ANNUAL REPORT
	1	12/2010	ANNUAL REPORT

Click on icon to view record

# Kansas Secretary of State

## Resident Agent and/or Registered Office Amendment

- File Date: 2018-07-24
- File Time: 18:12:46

1. Business Entity Name: MARINE CORPS LEAGUE, DEPT. OF KANSAS INC.
2. Business Entity Number: 1735174
3. Resident Agent: Harvey L. Harris
4. Registered Office: 149 SW Meadow Ln Topeka, KS 66606

"I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct."

Executed on the 24 of July , 2018.

Harvey L. Harris  
Authorized Officer



I, Kris W. Kobach, Secretary of State of Kansas, do hereby certify that this is the true and correct copy of the original document filed electronically on 24 of July , 2018.


Kris W. Kobach

To validate the authenticity of this electronically certified document please visit,  
<https://www.kansas.gov/rora-amend/validate> do and enter the following authentication

# Filing annual report with the State of Kansas

<https://www.kansas.gov/annual-reports/index.do>

[Kansas.gov](#) | [State Phone Directory](#) | [Online Services](#)



## Electronic Annual Report Filing System

To file an annual report electronically, you will need the following:

- Business entity name and/or business entity I.D. number per the Secretary of State's records.
- The entity must have an active or delinquent status to file online. [Perform a Business Search](#)
- Major credit card or checking account (for electronic check submission).

Payment:

- For-Profit Entities will pay a flat fee of \$50.00.
- Not-For-Profit Entities will pay a flat fee of \$40.00.

General Information:


- Browse the [FAQ](#) section for more information regarding this filing.
- All information provided is for the annual reporting period.
- If you are not prepared to file electronically, you can obtain a [paper form](#) from the Secretary of State's Web site.
- The electronic application's version of the annual report cannot be submitted by mail to the Secretary of State; it is solely for the purpose of electronic submission.
- Do not use the back button at any time while filing.

If you are ready to file electronically, please enter your business entity name and/or I.D. number in the fields below.

Business Entity Name:

Business Entity I.D. No.:  [Forgot your number?](#)

Do not use spaces, dashes, or underscores when entering your I.D. number.

 **MAKE SURE NAME & NUMBER SAME AS REGISTERED**

## Section 7 – Completing the IRS 990 N

### Annual Electronic Filing Requirement for Small Exempt Organizations — Form 990-N (e-Postcard)

<https://www.irs.gov/charities-non-profits/annual-electronic-filing-requirement-for-small-exempt-organizations-form-990-n-e-postcard>

About filing: Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990EZ, must be submitted electronically.

- The Form 990-N electronic-filing system moved from Urban Institute's website to IRS.gov in February 2016. **All filers** must register at IRS.gov prior to filing their next Form 990-N. This is a one-time registration; you won't be asked to register again when filing next year.
- **Form 990-N must be completed and filed electronically. There is no paper form.**
- Form 990-N filers may choose to file a complete Form 990 or Form 990-EZ instead.
- Use the Form 990-N Electronic Filing System (e-Postcard) User Guide (PDF) while registering and filing.

**Most common problems can be avoided by following the User Guide.**

- For filing system and website issues, see How to File: Frequently Asked Questions. If site issues are unresolved, call TE/GE Customer Accounts Services at 877-829-5500. A representative will file your Form 990-N information.
- Organizations should continue efforts to file, even if late.

### Who must file

Most small tax-exempt organizations whose annual gross receipts are normally \$50,000 or less can satisfy their annual reporting requirement by electronically submitting Form 990-N if they choose not to file Form 990 or Form 990-EZ instead.

## Form 990-N Filing Due Date

**Form 990-N is due every year by the 15th day of the 5th month after the close of your tax year. You cannot file the e-Postcard until after your tax year ends.**

**Example:** If your tax year ended on December 31, the e-Postcard is due May 15 of the following year. If the due date falls on a Saturday, Sunday, or legal holiday, the due date is the next business day.

If your 990-N is late, the IRS will send a reminder notice to the last address we received.

While there is no penalty assessment for filing Form 990-N late, **organizations that fail to file required Forms 990, 990-EZ or 990-N for three consecutive years will automatically lose their tax-exempt status.** Revocation of the organization's tax-exempt status will happen on the filing due date of the third consecutively-missed year.

## Information you will need when filing Form 990-N

Form 990-N is easy to complete. You'll need only eight items of basic information about your organization.

1. Employer identification number (EIN), also known as a Taxpayer Identification Number (TIN).
2. Tax year
3. Legal name and mailing address
4. Any other names the organization uses
5. Name and address of a principal officer
6. Web site address if the organization has one
7. Confirmation that the organization's annual gross receipts are \$50,000 or less
8. If applicable, a statement that the organization has terminated or is terminating (going out of business)

## IRS WEBSITES

Form 990 Overview course at StayExempt.IRS.gov

<https://www.stayexempt.irs.gov/home/existing-organizations/form-990-overview>

**User Guide .PDF for Form 990-N Electronic Filing System (e-Postcard)**

**REVIEW THIS DOCUMENT FOR MOST CURRENT INFORMATION**

<https://www.irs.gov/pub/irs-pdf/p5248.pdf>

**Tax Exempt Organization Search**

<https://apps.irs.gov/app/eos/>

The screenshot shows the IRS Tax Exempt Organization Search interface. At the top is the IRS logo and a search bar. Below the logo are links for Help, News, Language, Charities & Nonprofits, and Tax Pros. A navigation bar contains links for File, Pay, Refunds, Credits & Deductions, and Forms & Instructions. The main heading is "Tax Exempt Organization Search". Below this are three columns of search criteria: "Select Database" with a dropdown menu set to "Search All"; "Search By" with a dropdown menu set to "Employer Identification Number"; and "Search Term" with a text input field containing "481217467". Below these are three more columns: "City" with a text input field containing "Lenexa"; "State" with a dropdown menu set to "KS"; and "Country" with a dropdown menu set to "United States". At the bottom are two buttons: "Search" and "Reset", and a link for "Search Tips".

Select Database ⓘ	Search By ⓘ	Search Term ⓘ
Search All ▼	Employer Identification Number ▼	481217467
City	State	Country
Lenexa	KS ▼	United States ▼
<b>Search</b> <b>Reset</b> <a href="#">Search Tips</a>		



## Marine Corps League

EIN: 48-1217467 | Lenexa, KS, United States

### Form 990-N (e-Postcard) ⓘ

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

> Tax Year 2017 Form 990-N (e-Postcard)
> Tax Year 2016 Form 990-N (e-Postcard)
> Tax Year 2015 Form 990-N (e-Postcard)
> Tax Year 2014 Form 990-N (e-Postcard)
> Tax Year 2013 Form 990-N (e-Postcard)
> Tax Year 2012 Form 990-N (e-Postcard)

*Click on Tax Year you want to reference*

## Marine Corps League

EIN: 48-1217467 | Lenexa, KS, United States

### Form 990-N (e-Postcard) ⓘ

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

> Tax Year 2017 Form 990-N (e-Postcard)		
<b>Tax Period:</b> 2017 (07/01/2017 - 06/30/2018)	<b>Mailing Address:</b> 11232 Pflumm Road LENEXA, KS 662154811 United States	<b>Gross receipts not greater than:</b> \$50,000
<b>EIN:</b> 48-1217467	<b>Principal Officer's Name and Address:</b> William R Clinton 11232 Pflumm Road Lenexa, KS 662154811 United States	<b>Organization has terminated:</b> No
<b>Legal Name (Doing Business as):</b> Marine Corps League		<b>Website URL:</b>
> Tax Year 2016 Form 990-N (e-Postcard)		

## Section 8 – Completing the Paid Life Member (PLM) Audit

The Paid Life Member Fund is governed by the National Bylaws, Article Six, Section 645. It is a separate monetary fund that is maintained by National Headquarters. The PLM Fund pays out Interest Dividends annually in the Spring. Each level receiving a 1/3 disbursement (1/3 to National; 1/3 to the Department; 1/3 to the Detachment). In order for your Detachment to receive any money from the National PLM Fund you are required to complete a PLM Audit.

1. National Headquarters will send your Detachment a “Life Interest Check List” sheet with your 30 June Detachment Roster.
2. The Detachment should verify all LIVING Life Members. If a Life Member is recently deceased, annotate his date of death on the PLM Audit next to his name. NOTE: All deceased Life Members should have had a MCL “Notice of Death Form” submitted for them. The Notice of Death Form is available on the National website <https://www.mcleaguelibrary.org/>. A Notice of Death form & Transmittal entry “NOD” is the ONLY way to remove a deceased person from your Detachment Roster.
3. The Detachment will receive a disbursement for each Life Member who has been a Life Member for MORE THAN 2 years as of the date on the PLM Audit sheet. Normally 30 June. (i.e. PLM Date 03/2012 would be eligible to receive a disbursement with the Spring 2016 payout; PLM Date, 4/2014 would NOT be eligible until 2017 Spring payout)
4. The Detachment Commandant & Detachment Paymaster must SIGN & DATE the PLM Audit. Print your name under your Signature.
5. **The PLM Audit MUST be forwarded to the Department Paymaster by 15 November.** The Department Paymaster will forward to National HQ to meet their deadline of 31 December. **If they are postmarked 31 DECEMBER or prior, they will be included in that years PLM Audit results at National HQ. Please see example.**
6. **TAPS** date on this form is the date MCL National informs Semper Fi Magazine of death.

**Marine Corps League**  
**Life Interest Check Edit List for**  
**Fiscal Year: 2018**

Life# 60276

Date: 7/1/16

Member#      Name      Life Number Lifecode      Life Join Date      eligible

taps

**MIDWEST DIVISION****DEPARTMENT OF KANSAS**

**TAPS** - date entered by  
 MCL National when they  
 notify Semper Fi  
 Magazine of death

**Detachment: 612 - S E K    Department: KS**

98111	ADDIS LONIE	34097	PL	04/2002	True	
139925	BEEVER ARNOLD E	16855	PL	12/1997	True	
71489	BROWN JIM	12189	PL	08/1994	True	
244670	COOK TONY A	57516	PL	11/2013	True	
64940	DOLLISON DAN P	9544	PL	10/1992	True	
<del>106888</del>	<del>ERWIN DONALD</del>	<del>14384</del>	<del>PL</del>	<del>03/1996</del>	<del>True</del>	DETACHMENT CORRECTION EXAMPLE Deceased 01/01/2018 Actual Date of Death.
64961	FUQUA DAVID	37265	PL	08/2003	True	
65799	GARMAN GENE	47496	PL	12/2006	True	
182702	HARDING LLOYD E	39023	PL	02/2004	True	
64964	HUDIBURG WALTER	6331	PL	05/1990	True	
132928	HURST DICK	42337	PL	12/2004	True	
80204	JONES RICHARD E	46573	PL	11/2006	True	
174542	KECK THOMAS J	55729	PL	11/2012	True	
187238	MARSHALL BOB	53320	PL	12/2010	True	
64944	MORRISON LEONARD	10196	PL	04/1993	True	
64942	NELSON WALTER	10313	PL	04/1993	True	
188304	PRUNTY MICHAEL	48726	PL	09/2007	True	
64968	SCOTT JAMES V	8278	PL	02/1992	True	2/23/17
33332	SLOAN JOE	46181	PL	10/2006	True	
64943	STARK LEON R	46575	PL	11/2006	True	
183684	STARK LEON R	46575	PL	11/2006	True	
95345	STEWART DONALD W	9625	PL	11/1992	True	5/17/17
100632	THOMPSON DANNY	10656	PL	07/1993	True	
70121	WOODS RAYMOND H	57517	PL	11/2013	True	
126995	CALDWELL JOHN L	61367	PL	08/2017	False	
241076	HOLLOWAY KENTON	62235	PL	04/2018	False	

Total Eligible Life Members for 612 - S E K      **24**

Total Non-Eligible Life Members for 612 - S E K      **2**

Total Life Members for 612 - S E K      **26**

**REVIEW FOR ACCURACY**

**MAKE SURE NOTED CORRECTIONS HAVE BEEN ADDRESSED VIA Notice of Death Form &  
 a Transmittal with "NOD" Code. Submit to Department Paymaster by November 15**

**"We certify the Life Audit is correct"**

\_\_\_\_\_  
**Commentant**

Date: \_\_\_\_\_

\_\_\_\_\_  
**Paymaster**

Date: \_\_\_\_\_

## Section 9 – Recommendations

1. Keep good records that can be passed down to your successor. Hard copies and/or electronic files are acceptable. You can use computerized accounting software such as QuickBooks, Quicken, etc. If you keep all your documents and record keeping on a computer, make sure to have a back-up on an external hard drive or cloud storage.
2. PRINT or TYPE legibly on all documents.
3. Detachment Paymasters should seek out the advice and assistance at the Department level before calling National Headquarters.
4. Fill out all forms COMPLETELY. The Department Paymaster will check the documents and send them back to you if they are not correctly filled out.
5. All Detachment banking accounts should have at least THREE (3) people listed on them. That way if one person becomes deceased, the other two can still access the accounts.
6. All Detachment checks should have TWO (2) signatures on them. NOTE: The exception to this rule is dues checks made out to the Department of Kansas and dues checks made out to MCL National HQ's. **EXCEPT FOR Transmittals to Department.**
7. The National Website [www.mcleaguelibrary.org](http://www.mcleaguelibrary.org) has all the electronic forms available for you to download and utilize. Download each time you need a form to ensure you are using most current.
8. By 15 November complete IRS 990 for your Fiscal Year (15 April if on Calendar Year).
9. By 15 November complete PLM Audit and send to Department Paymaster.
10. With Detachment Adjutant reconcile your Detachment Quarterly Roster to make sure your membership is current with their annual due's renewal. Verify that National HQ's has input every Transmittal you sent them. The National Roster is made available Quarterly (31 March, 30 June, 30 June, 31 December).

11. If a member chooses not to renew, ask why. Learning why a member leaves the MCL is important. Could your Detachment have done anything differently to keep this member? Encourage the member to join or transfer to another Detachment.
12. DO NOT wait to send in Transmittals. Every member deserves to have his/her membership renewal processed in a timely manner.
13. All Checks to the Department of Kansas should be made payable to: Dept of KS MCL. Write ONE (1) check to the Department per transmittal batch.
14. All Checks to National Headquarters should be made payable to: National HQ, MCL, Inc.
15. Only write ONE (1) check to National Headquarters per transmittal batch.

## MCL DEPARTMENT OF KANSAS DETACHMENT ENTITY NUMBERS

Kansas Business Entity Search:

<https://www.kansas.gov/bess/flow/main?execution=e1s4>

Federal EIN Organization Search: <https://apps.irs.gov/app/eos/>

### MT. SURIBACHI DETACHMENT MARINE CORPS LEAGUE

(Detachment #105 / Smith Center, KS) - [Date of Formation in Kansas](#): 11/10/1958 / 0284117

Smith Center, KS – **Federal EIN: 48-6132215**

### MARINE CORPS LEAGUE, SOUTHEAST KANSAS DETACHMENT INC.

(Detachment # SEK #612) **Date of Formation in Kansas: 10/03/1986 / 0997866**

Independence, KS – **Federal EIN: 48-1054639**

### MARINE CORPS LEAGUE, DEPT. OF KANSAS INC.

(Department of Kansas) [Date of Formation in Kansas](#): 04/19/1990 / 1735174

Topeka, KS - **Federal EIN: 48-6118106** (Devil Dogs Federal EIN: 47-1145301)

### AIR CAPITAL DETACHMENT, MCL INC.

(Detachment Air Capital #773) **Date of Formation in Kansas: 07/11/1994 / 2171858**

Wichita, KS – **Federal EIN: 48-1151520**

### THE TRI-RIVERS DETACHMENT MARINE CORPS LEAGUE INC.

(Detachment Tri-Rivers #730) [Date of Formation in Kansas](#): 10/30/1998 / 2662807

Salina, KS - **Federal EIN: 48-1207996**

### MARINE CORPS LEAGUE, EDWIN A SCHUMACHER DETACHMENT 740, INC.

(Detachment Edwin A. Schumacher #740) **Date of Formation in Kansas: 09/27/2000 / 2930154**

Hays, KS - **Federal EIN: 80-0944971** (*Note, reinstated number*)

### GEN. LEWIS W. WALT DET. MARINE CORPS LEAGUE, INC.

(Detachment Gen Lewis W. Walt #682) **Date of Formation in Kansas: 01/18/2001 / 2971984**

Topeka, KS – **Federal EIN: 48-1072176**

### MARINE CORPS LEAGUE INC. DET. 1025

(Detachment Gen Larry Oppenheimer #1025) [Date of Formation in Kansas](#): 12/13/1999 / 2813525

Lenexa, KS – **Federal EIN: 48-1217467**