



AMVETS LADIES AUXILIARY
 DEPARTMENT OF FL
 Donnajeanne Merritt, Executive Secretary
 7520 NE 105th Avenue
 Bronson, FL 32621
 Phone: 352-306-0030
execsecyfl@gmail.com



LIFE MEMBER REPLACEMENT CARD FORM

Date: _____

Department: Florida Auxiliary # _____ Location/City: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Membership ID#: _____

SEND CARD TO: Membership Processing Person

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

INSTRUCTIONS:

1. Fill out the Replacement Life Member form completely.
2. Include Member's ID#.
3. The cost of the replacement card is \$15.00 plus the Department's fee of \$5.00.
 Make check in the amount of **\$20.00** payable to Department **not** National
4. Send two (2) copies of this form to the Executive Secretary with a check.