



**AMVETS LADIES AUXILIARY**  
**4647 Forbes Boulevard**  
**Lanham, Maryland 20706**  
**Phone - 301-459-6255**  
**Fax - 301-459-5403**

**Mail two (2) copies to:**  
 AMVETS Ladies Aux Dept of FL  
 Jerri Devoll, Exec. Sec'y.  
 217 Ladue Ave  
 Crestview, FL 32539  
 850-306-3258  
[execsecyfla@yahoo.com](mailto:execsecyfla@yahoo.com)

**LIFE MEMBER REPLACEMENT CARD FORM**

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

Department: Florida      Auxiliary # \_\_\_\_\_      Location/City: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_

Membership ID#: \_\_\_\_\_

**SEND CARD TO:**

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.