



# Dues Remittance Form

## MAIL TWO (2) COPIES TO:

AMVETS LADIES AUXILIARY DEPT OF FL  
Donnajeane Hakler-Merritt  
Executive Secretary  
7520 NE 105<sup>th</sup> Avenue  
Bronson, FL 32621  
Phone: 352-306-0030  
[execsecyfl@gmail.com](mailto:execsecyfl@gmail.com)

TYPE OR PRINT, USE BLACK OR BLUE INK  
MUST BE LEGIBLE

Submitted by		
DEPARTMENT FLORIDA	AUXILIARY #	DATE
NAME:		
MAILING ADDRESS:		
CITY, STATE, ZIP:		
DAYTIME PHONE:		

Recap Information		
MEMBERSHIP YEAR		MAIL TWO (2) COPIES TO DEPARTMENT
NEW		NEW LIFE
NEW HONORARY		HONORARY
RENEWAL		REJOIN
RENEW TO LIFE		AFTER 12/31 AND BEFORE 5/23
TOTAL	NUMBER OF MEMBERS LISTED ON THIS DUES FORM (NOT A RUNNING TOTAL OF YOUR MEMBERSHIP OR THE TOTAL OF YOUR CHECK)	

	Type	Membership ID#	Last Name, First Name, MI	Date of Birth	Phone Number w/area code	Street address	Mailing Address - City	State	Zip Code
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

Type: N=New; R=Renewal; RJ= Rejoin (dues paid after 12/31; NL=New Life; RL=Renew to Life; NH= New Honorary; RH=Renew Honorary - Honorary Form must be submitted with NH Revised 8/2021