

LIFE MEMBER VERIFICATION REPORT

DUE BY: OCTOBER 1, 2018

(If no exception is found, please state below.)

CHAPTER ADJUTANTS - VERIFICATION FOR CHAPTERS

I, _____, do hereby certify that as the **Chapter or Department Adjutant** for Chapter # _____, Department of _____, that the **Life Members** listed on the roster from National Headquarters as of **June 30, 2018** are verified as being members of the chapter except for those listed below:

Please state reason for exception (Deceased [D], Transferred [T]). Provide date of death or transfer.

<u>Name</u>	<u>Member #</u>	<u>Reason for Exception</u>	<u>Date Deceased/Transferred</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(SEE NOTES BELOW) Chapter/Department Adjutant: _____
Signature Member ID Date

CHAPTERS: SEND ORIGINAL FORM TO NATIONAL, ONE (1) COPY TO DEPARTMENT, RETAIN ONE (1) COPY FOR YOUR FILE

DEPARTMENT ADJUTANTS - VERIFICATION FOR DML MEMBERS ONLY

I, _____, do hereby certify that as the **Department Adjutant** of the Department of _____, the **Life Members** listed on the roster from National Headquarters as of **June 30, 2018** are verified as being members-at-large of the Department except for those listed below:

Please state reason for exception (Deceased [D], Transferred [T]). Provide date of death or transfer.

<u>Name</u>	<u>Member #</u>	<u>Reason for Exception</u>	<u>Date Deceased/Transferred</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(SEE NOTES BELOW) Department Adjutant: _____
Signature Member ID Date

DEPARTMENTS: SEND ORIGINAL FORM TO NATIONAL, RETAIN ONE (1) COPY FOR YOUR FILE

1. **No Life Member Rebate will be paid unless the Life Member Verification Report is properly signed and received at the National Headquarters by October 1, 2018. Postmark will be accepted.**
2. **Chapter or Department Adjutant *must verify and sign* the Chapter report. Department Adjutant *must verify and sign* the Department report.** The report will be returned if it is submitted without the required signature.
3. **DO NOT** send a List of your Life Members. List only Exceptions to the roster of June 30, 2018.
4. No rebates are paid to Departments for unverified members of Chapters. If a Chapter fails to verify, Chapter and Department Lose!
5. The per capita payment will be 50% to MOPH HQs, and 50% equally split between Departments and Chapters of interest earned by Life Membership Fund for verified members.

(Effective 8/30/2018)