

LOUISIANA DIVISION 2021-2022 DUES & OPTIONAL GIVING SUBMITTAL FORM

(MAKE COPIES AS NEEDED)

CAMP NAME: _____

CAMP # _____

Reported By: _____

Telephone # _____

EMAIL Address:

Use this form to report *itemized* amounts included in your enclosed check to Division.....Please print clearly and legibly.

A	B	C	D	E	F	
Total Division Dues	Division Operations <i>MRS Line #1</i>	SCV Confederate Museum <i>MRS Line #2</i>	Giant Flag Fund <i>MRS Line #3</i>	Camp Moore <i>MRS Line #4</i>	Louisiana Division Legal Defense Fund <i>MRS Line #5</i>	
\$	\$	\$	\$	\$	\$	

G

ADDITIONAL \$\$ FOR CAMP MRS Line #6 (Money to be retained by Camp)

\$

Do not include Optional Giving to your Camp (line G above) in the amount you send to the Division.

This is for accounting purposes only and IRS Verification.

GRAND TOTAL

(Sum of items A-F above)

Check Amount
\$

Check Number	Check Date
# _____	_____

Return this form with your Check to:

**LOUISIANA DIVISION SCV
BOBBY G. HERRING, DIVISION ADJUTANT
3404 TARA LANE
SHREVEPORT, LA 71118**

Make Checks payable to: LA Division - SCV

IMPORTANT!

When returning this form, please include a list of the members you are paying for. Your SCV Camp Roster with highlighted names will work very well for this purpose, but any legible list that clearly shows who you are paying for will do. Please be sure to include their SCV ID# (if you have it) for cross reference.