

LOUISIANA DIVISION

20__ - 20__ DUES & OPTIONAL GIVING SUBMITTAL FORM

(FILL IN YEAR & 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> | Monuments, Memorials, & 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
STEVEN COYLE, DIVISION ADJUTANT
608 ZEPHYR LANE
RUSTON, LA 71270**

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.