LOUISIANA DIVISION

DUES & OPTIONAL GIVING SUBMITTAL FORM

(FILL IN YEAR & MAKE COPIES AS NEEDED)

CAMP NAME:					CAMP#		
Reported By:						Telephone #	
	Address:	aired amounts	included in your	r analogad aha	ak ta Division	Diago	print aloogly and logibly
A Se this form	to report <i>Item</i>	c c	nciuded in your	enciosed che	ck to Division	Please	print clearly and legibly.
Total Division Dues	Division Operations MRS Line #1	SCV Confederate Museum MRS Line #2	Heritage Promotion Fund MRS Line #3	Camp Moore MRS Line #4	Memorial Hall Fund MRS Line #5		ADDITIONAL \$\$ FOR CAMP MRS Line #6 (Money to be retained by Camp)
\$	\$	\$	\$	\$	\$		\$

GRAND TOTAL

(Sum of items A-F above)

Check Amount	Check Number	Check Date
\$	#	

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.

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.