

# Membership Card Verification Form



Complete this form and send it to Department Headquarters with all unused **blank** membership cards.

Post # \_\_\_\_\_ Membership Year \_\_\_\_\_

\_\_\_\_\_ # of Extra Blank Cards issued (by Department during the year)

\_\_\_\_\_ # of Members Renewal (preprinted and hand typed)

\_\_\_\_\_ # of new Members and Transfers

\_\_\_\_\_ # of Cards used as *Replacement* cards

**Total cards used** \_\_\_\_\_ **Total unused blank cards returned** \_\_\_\_\_

Post Officer Signature \_\_\_\_\_ Date \_\_\_\_\_