



VFW AUXILIARY DEPARTMENT OF NEW YORK AUXILIARY / OFFICER / MEMBER CHANGE FORM

AUXILIARY No. _____ DISTRICT No. _____ CURRENT DATE: _____

A. INDICATE AUXILIARY INFORMATION THAT IS TO BE UPDATED (CHECK ALL THAT APPLY)

CHANGE OF MEETING PLACE: _____
Previous Meeting Place _____ New Meeting Place _____

CHANGE OF MEETING DAY/TIME: _____
Previous Meeting Day/Time _____ New Meeting Day/Time _____

CHANGE OF ANNUAL DUES: Previous Dues Amount \$: _____ New Dues Amount \$: _____

CHANGE OF OFFICER: _____
Indicate Office _____ Name of Previous Officer _____ Name of New Officer _____

NOTE: New Treasurer Must File IRS Form 8822 B Within 60 Days.

B. INDICATE MEMBER INFORMATION THAT IS TO BE UPDATED (CHECK ALL THAT APPLY)

CHANGE OF NAME: Former First Name: _____ New First Name: _____
Former Last Name: _____ New Last Name: _____

CHANGE OF ADDRESS CHANGE OF TELEPHONE NO. CHANGE OF EMAIL ADDRESS DEATH OF MEMBER
DATE OF DEATH _____

COMPLETE THE FOLLOWING INFORMATION FOR MEMBER / NEW OFFICER BEING UPDATED:

MEMBER'S NAME: _____ MEMBERSHIP ID No. _____

CURRENT ADDRESS: _____

EMAIL ADDRESS: _____

PHONE No. HOME: _____ CELL: _____

C. MEMBERSHIP CARD REPLACEMENT:

Replacement card fees: ANNUAL MEMBER - \$5 or LIFE MEMBER - \$10. Cards can be replaced in any of the following manners:

1. Member can order their own replacement card thru their MALTA account. Paper cards can also be downloaded from MALTA.
2. Auxiliary Treasurers can purchase replacement cards on members behalf.
3. Member can send request and applicable fee to the Department Treasurer. Make check payable to 'VFW Auxiliary Department of NY', earmarked 'Replacement Card'.

To Process Changes - SEND COMPLETED FORM TO:
DEPARTMENT SECRETARY Chris Leavor
2027 Cemetery Hill Road ~ Franklinville, NY 14737
EMAIL: CAL2027@hotmail.com ~ TELEPHONE: (716) 676-2400