



(acknowledgement)

MEMBERSHIP TRANSFER FORM Grand Island, FL 32735

Transfer Processing Instructions

- A current member in good standing who makes request to a Department/Post of choice may initiate a member transfer—or a Department/Post may initiate the action by inviting a member to transfer.
- Three signatures/dates are required to transfer: the member, the adjutant of the accepting post and the adjutant of the former post—usually in that order. The former post may not delay or deny a member's transfer request unless there is a cause, such as the member owes money or has possession of post property that must be returned. NOTE: If a transfer is denied for cause, the reason for denial must be submitted in writing to the department headquarters, along with the unsigned transfer form, within 10 days. The department will notify all parties involved regarding this action. PRINT AND SUBMIT—DO NOT EMAIL.
- The completed and signed transfer form should be mailed to the department office where it is signed and dated, copied, and forwarded to the appropriate Department/Post official e

Name:					Date:			
Address:					Member ID#:			
Home Phone:	()			Member Type:	Life[]	Annual [
Work Phone:	()			Date Joined AMVETS			
Former Address:					Email:			MARINEN SERVICE SERVIC
(if moving)					Gender:	М□	F	
Branch of Service:					DOB:			
Date Entered:					Date Discharged:			
Signature of Member:					Date:			STATE OF THE STATE
			Tran	sferring Inforn	nation			
Transfer To:		Post Num	ber:		Department:			
Adjutant Sign (new Post accep					Date:			The state of the s
Transfer From:		Post Num	ber:	The second	Department:			
Adjutant Signature: (former Post release)					Date:			
Department Signature:			Activities of the control of the con		Date:		MICE (A CATALON CONTRACTOR OF A CATALON CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONT	