

This form must be printed and sent to Department with payment!

Membership Year: _____ Transmittal #: _____ Page _____ of _____
Unit Name: _____ Unit Number: _____ Date: _____
Contact Name (in case of issues): _____ Phone: _____
Address: _____

Check Number: _____ (make payable to **Department of Nevada**)

Dues

Number of Seniors: _____ x \$33.00 = _____

Number of Juniors: _____ x \$ 3.50 = _____

TOTAL DUE:

\$

ALL RENEWALS

	Member Name	Member Number
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

List ALL Alphabetically by Last Name!

11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

FOR DEPARTMENT USE ONLY

Ck #: _____ Amount: _____ Amount Due: _____

Notes Overpayment Made - Credit: _____

Underpayment Made - Owed: _____ RM: _____