



Department of Idaho  
8766 Rim RD Nampa, ID 83686

**POSTAGE \$20**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, ID (Zip) \_\_\_\_\_

**PLEASE specify which three categories you need!**  
**District, Unit or Individual.**

District # \_\_\_\_\_

Unit and # \_\_\_\_\_/\_\_\_\_\_

Individual Name \_\_\_\_\_

Submitted by: \_\_\_\_\_

Signature: \_\_\_\_\_

Submit this form to: American Legion Auxiliary Department of Idaho  
8766 Rim RD  
Nampa, ID 83686

If you have any questions, contact Joann (208) 537-8133 or Kristal (208) 362-9359  
[idalegionaux@gmail.com](mailto:idalegionaux@gmail.com)

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(Completed by Department only)

Bank \_\_\_\_\_ Check # \_\_\_\_\_ Amount \_\_\_\_\_

Date submitted by Department \_\_\_\_\_ Signature of Office Official \_\_\_\_\_

**Thank You**