

# LOUISIANA DIVISION    2018-2019 DUES & OPTIONAL GIVING TRANSMITTAL REPORT

(MAKE COPIES AS NEEDED)

CAMP NAME: \_\_\_\_\_

CAMP # \_\_\_\_\_

Reported By: \_\_\_\_\_

Telephone # \_\_\_\_\_

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

Use this form to report *itemized* amounts included in your enclosed check to Division.....Please print clearly and legibly.

A	B	C	D	E	F	N/A
Total Division Dues	Division Operations <i>MRS Line #1</i>	Elm Springs Building Fund <i>MRS Line #2</i>	Giant Flag Fund <i>MRS Line #3</i>	Camp Moore <i>MRS Line #4</i>	Louisiana Division Legal Defense Fund <i>MRS Line #5</i>	N/A
\$	\$	\$	\$	\$	\$	\$

**G**

**ADDITIONAL \$\$ FOR CAMP MRS Line #6 (Retained by Camp)**

\$

Do not include Optional Giving to your Camp (line G above) in the amount you send to the Division.

This is for accounting purposes only and IRS Verification.

## GRAND TOTAL

(Sum of items A-F above)

Check Amount
\$

Check Number	Check Date
# _____	_____

**Return this form with your Check to:**

**LOUISIANA DIVISION SCV  
BOBBY HERRING, DIVISION ADJUTANT  
P.O. Box 8428  
SHREVEPORT, LA 71148-8428**

*Make Checks payable to:* LA Division - SCV

## IMPORTANT!

When returning this form, please include a list of the members you are paying for. Your SCV Camp Roster with highlighted names will work very well for this purpose, but any legible list that clearly shows who you are paying for will do. Please be sure to include their SCV ID# (if you have it) for cross reference.