



American Legion Auxiliary
Department of Michigan
212 North Verlinden Ave, Ste. B • Lansing, Michigan 48915
Phone 517-267-8809 • www.michalaux.org

DUPLICATE CARDS FORM

UNIT NAME: _____

DATE: _____ UNIT NO. _____ DISTRICT NO. _____

DUPLICATE: Submit only if a member has been accidentally assigned two membership ID numbers.

Member Name: _____

ID#1: _____ **ID#2:** _____

Member Name: _____

ID#1: _____ **ID#2:** _____

Member Name: _____

ID#1: _____ **ID#2:** _____

This form is being submitted by:

Name: _____

Signature: _____

Title: _____

Address: _____ City, Zip: _____

Phone: _____

**Send this form to the Department: American Legion Auxiliary Department of Michigan, 212 N.
Verlinden Ave., Suite B, Lansing, MI 48915**