

United Daughters of the Confederacy
South Carolina Division

2011-2012 Reinstatement Form

Date _____

Chapter _____ No. _____

City _____ - _____

Type or print names alphabetically. Make two copies, retaining one copy for Chapter records, send one copy with check to Division Treasurer.

Member Name _____
Last First Middle Maiden

Member Name _____
Last First Middle Maiden

Member Name _____
Last First Middle Maiden

Member Name _____
Last First Middle Maiden

General per capita, current year	\$15.00
General reinstatement fee	\$10.00
Division per capita, current year	\$10.00
Division Reinstatement Fee	\$ 5.00
Total	\$40.00

Totals # _____ Reinstatements Total \$ _____

All reinstatements must include General per capita, General reinstatement fee, the current Division per capita, and Division reinstatement fee.

Chapter Treasurer _____
Mailing address _____

Telephone and e-mail _____

SC Division Treasurer's Form: 2 – 2009 revised 4/27/12
Form may be copied

MAIL TO: Charlene Shealy-Lanford, 1026 Dreher Island Rd, Chapin SC 29036-9519