



# NATIONAL INTER~POST TRANSFER FORM

Members, please use a pen and fill in **ALL** blanks, no abbreviations  
and send to Ray McGuire [webmaster@s-a-m-s.org](mailto:webmaster@s-a-m-s.org).

Copies will be forwarded to the Posts.

NAME of Veteran, or Spouse, Widow/Widower, or Lineal Descendant of past present member of the US Armed Forces or Active ROTC Cadet.					
FIRST, MIDDLE, LAST				EMAIL	
MAILING ADDRESS					
STREET, CITY, STATE, ZIP					
PHONE	MEMBER #	GENDER	DATE OF BIRTH over 18	POST TRANSFERING FROM:	POST TRANSFERING TO:
WITH AREA CODE		M [ ] F [ ]	MM/DD/YYYY	POST #	POST#

DATE OF APPLICATION	PRINT NAME (PLEASE PRINT CLEARLY)	SIGNATURE BELOW (Type Name for Signature)

<b>FOR ADMIN. USE ONLY:</b>
Date Received to National    ___ / ___ / ___