



SUPPLY LIST

2009 – 2010

AUXILIARY TO SONS OF UNION VETERANS OF THE CIVIL WAR

(Please destroy all old lists.)

Applications for Membership	Per 15	\$1.00
Brochures (Postage will be billed)		Free
Constitution, Rules & Regulations	Each	\$3.00
Updates from 2001 through 2007 to CR&R	Each	\$1.00
Credentials	Per 50	\$1.50
Honorable Discharges	Each	\$0.05
Membership Identification Cards	Per 100	\$3.00
Notice to Delinquents	Per pad	\$1.00
Rituals	Each	\$3.00
Transfer Cards	Each	\$0.25
Trustees' Quarterly Reports	Per pad	\$0.75
Descriptive Pages	Per 15	\$2.00
Cash Pages	Per 15	\$2.00
Officers Roll Card	Each	\$0.35
Auxiliary Secretary Requisition Book	Each	\$3.00
Auxiliary Treasurer Receipt Book	Each	\$2.00
Department Secretary Requisition Book	Each	\$3.00
Department Treasurer Receipt Book	Each	\$2.00
National Encampment Proceedings	Each	\$4.00
Bronze Membership Badge	Each	\$25.00
Auxiliary President Badge	Each	\$25.00
Auxiliary Secretary Badge	Each	\$25.00
Auxiliary Treasurer Badge	Each	\$25.00
Past Auxiliary President Badge	Each	\$25.00
Past Department President Badge	Each	\$25.00
Past National President Gold Pin	Each	\$10.00
Past Department President Silver Pin	Each	\$10.00
Past Auxiliary President Bronze Pin	Each	\$10.00
Enameled Recognition Pin	Each	\$7.00
25 Year Gold Pin	Each	\$7.00
50 Year Gold Pin	Each	\$7.00
25 Year Gold or Silver Charm	Each	\$6.00
Ribbons: National, Department, Auxiliary Officer	Each	\$0.35
Ribbon: Tri-Color	Each	\$0.35
Banner Name Patch	Each	\$5.00
Emblem Patch	Each	\$6.00
Tote Bags	Each	\$8.00

REQUISITION FOR SUPPLIES
Auxiliary to Sons of Union Veterans of the Civil War

To: Michelle Langley, Supply Officer
3191 Co. Rd. 139
Interlaken, NY 14847
(607) 532-4046
email: shelly57@rochester.rr.com

Date: _____

Enclosed is a check payable to **National Organization ASUVCW** in the amount of \$_____.

Please send the following Supplies to:

Name _____

Street _____

City _____ State _____ Zip _____

For Auxiliary _____ # _____ Department: _____

Please list each item separately:

Quantity	Item	Amount
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Amount of Order Sub-total _____

Postage Charge of **\$3.00** to be added on orders of
\$5.00 or more.

Postage _____

Total Enclosed _____

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To be filled in by National Supply Officer:

Date received: _____

Amount: \$ _____

Date shipped: _____

Shipping Cost: \$ _____