



AUXILIARY TO SONS OF UNION VETERANS OF THE CIVIL WAR AUXILIARY TRANSFER FORM

(Send one copy to Dept. Secretary, retain a copy for Aux. records, & provide a copy to the transferring Sister.)

From: _____ Auxiliary No. _____
(Issuing Auxiliary)

Department of _____

TO ANY AUXILIARY, GREETINGS:

This is to certify that Sister _____ is a Sister in good standing in this Auxiliary, and having paid all dues, we have granted her this transfer form and recommend her for admission into any Auxiliary of the Order.

If at the expiration of **One Year** from the date hereof, she has not been admitted to membership in any Auxiliary, this transfer form shall be void and the holder shall be considered as honorably discharged from the Order. She shall be amendable to this Auxiliary for discipline until we are notified that she has deposited this form in some other Auxiliary. Any Auxiliary receiving this form shall immediately notify this Auxiliary of their action by mailing the completed Page 2 to the President of this Auxiliary.

**The following is a correct transcript from
the records of the Auxiliary:**

(Signature of the Sister to whom this form is granted.)

Sister _____ is now _____ years of age, and by occupation is a _____
_____. Her present address is:

(Street) (City) (State) (ZIP Code)

She was initiated on the _____ day of _____ in the year _____, being eligible to membership in one of the following categories [complete applicable section]:

1. Direct or collateral descent from _____, who enlisted _____, as a _____ in Company _____, Regiment (or Ship) _____ and was honorably discharged _____ on account of _____.

[OR]

2. Wife, mother, widow, daughter, or legally adopted daughter of _____ who is a lineal member in good standing of the Sons of Union Veterans of the Civil War, Camp No. _____ in the Department of _____.

[OR]

3. Associate member of the Auxiliary (no lineal descent, nor qualifying SUCVW relative).

Dated at _____ this _____ day of _____, _____.

Auxiliary President _____ Auxiliary Secretary _____

(The issuing Auxiliary shall also provide the applicable information requested on Page 2 of this form.)



AUXILIARY TO SONS OF UNION VETERANS OF THE CIVIL WAR AUXILIARY TRANSFER FORM (PAGE 2)

The Secretary of the Auxiliary to which the Sister is transferring into (receiving Auxiliary), shall complete, sign, and mail this page to the President of the Auxiliary granting this transfer (issuing Auxiliary).

From: _____ Auxiliary No. _____
(Receiving Aux. Name) *(Receiving Aux. No.)*

Department of _____
(Receiving Dept. Name)

To President _____
(Issuing Aux. President Name) *(Issuing Aux. Name)*

Auxiliary No. _____, Department of _____ :
(Issuing Aux. No.) *(Issuing Aux. Dept.)*

Sister _____ on transfer from your Auxiliary, has deposited her transfer form in this Auxiliary and was received into membership on the _____ day of _____ in the year _____.

Auxiliary President _____ Auxiliary Secretary _____

Granted to Sister _____
of _____ Auxiliary No. _____
Department of _____

Expires One Year from the date of issue: ____/____/____

In the space below, please record all Auxiliary offices held by the Sister to whom this transfer form is being granted. If she never held any offices in the Auxiliary, it should be so stated.
