MARINE CORPS LEAGUE BY LAWS REQUIRE

Detachment Report of Officers Installation are sent to

DEPARTMENT ADJUTANT at tracerduck@aol.com and COMPLIANCE OFFICER at mimclcompliance1@gmail.com (electronic copy)

DETACHMENT CHARTER POSS	SESSION & LOCATION:			
Detachment Number:De	tachment Name:			
Who has or is in possession of the	Detachment Charter:			
Address:	Phone:			
Where is the physical location of the	he Charter:			
Financial Institution: Name of Detachment bank/credit	union and the account numbers, k	palances are not required:		
Name:	Account #_	Account #		
Address:	Checking#_			
	Savings#			
Routing Number:				
Additional Accounts: Specify Type	(Saving, Checking, CD, Money Ma	rket, Scholarship, etc.)		
Type of Account:	Financial:	Financial:		
Account #:	Address:			
Certification:				
We certify that the above information	tion is current and correct.			
Detachment Commandant	Detachment Paymaster	 Date		

THIS REPORT MUST ACCOMPANY REPORT OF OFFICER INSTALLATION AND ARE SENT TO DEPARTMENT ADJUTANT WITHIN 10 DAYS OF OFFICER INSTALLATION.