

**Oct. 25, 2014 Fall Conference Advance Registration Fee \$20.00 per person
It is very important that you pre-register! \$30.00 after October 20**

Return with payment prior to October 20, 2014 to:

Check #: _____

DAV State Dept. of Missouri
413 W. HICKORY
KIRKSVILLE, MISSOURI 63501-1307
(660) 627-0328 - FAX (660) 665-0314
davmokville@gmail.com (Claudia Minor)

Check Amount: \$ _____

DAV Member Name: _____ Chapter # _____

State Officer (Yes ___ No ___) State Position Held _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____ Phone: _____

DAVA Member Name: _____ Unit # _____

State Officer (Yes ___ No ___) State Position Held _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____ Phone: _____

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