

Sons of Union Veterans of the Civil War
Form 30 - Brother's Status Report

(Retain copy for Camp Records)

ATTENTION Camp Secretary: Two copies of Form 30 shall be submitted to the Department Secretary by the 15th day of the next month following a change to an individual brother's membership.

Camp Name _____ Camp No. _____ City: _____

Department of _____

Brother's Name _____ Date of Birth: _____
First Full Middle Name Last MM/DD/YYYY

Brother's Address _____
Street City State Zip +4

Brother's Telephone Number _____ EMAIL _____

Check the classification related to the Brother identified, below.

Member Real Son Associate Life Member Junior Junior Associate Dual

Indicate the reason for submitting this form, for the Brother whose name and address are listed below, by checking the corresponding category.

1. New Brother - \$5 Application Fee + pro-rated Department & National per capita dues submitted = _____

2. Reinstated Brother – \$10.00 Reinstatement Fee + full annual Department and National per capita dues submitted = _____

3. Primary Camp - Brother proclaims his PRIMARY Camp as (indicate Camp Name, Number, and Department):

Camp Name _____ Camp No. _____ Department: _____

4. Dual Camp - Brother proclaims his DUAL Camp as (indicate camp name, number, and department):

Camp Name _____ Camp No. _____ Department: _____

5. Change of Status: ASSOCIATE to MEMBER (Supporting documentation attached)
JUNIOR to MEMBER
JUNIOR ASSOCIATE to ASSOCIATE
TERMINATION of DUAL Status
NAME CHANGE (Supporting documentation attached as needed)
SUPPLEMENTAL FORM 3 attached.

6. Discharges: Honorable General (Date of Discharge _____)

7. Brother's Resignation from Camp No. _____ **Effective Date:** _____.

8. Deceased Brother (Date of Death _____)

9. Brother's Change of Address E-mail update or change. Telephone. (indicated above)

10. Brother's Transferring - Out In To/From: _____
Brother Secretary attach Form 4 Camp Name and Number Department

11. Report Additional Achievements of Brother: U.S. Armed Forces Veteran or currently serving
R.O.T.C. Graduate Eagle Scout

12. Add Brother to Combat Zone

13. Release Brother from Combat Zone

14. Correction to Date of Birth _____

Respectfully submitted in Fraternity, Charity, and Loyalty,

Camp Secretary Date: _____

National per capita dues and application fees submitted = \$ _____

Department Secretary _____ Date _____

Received at National Headquarters - Date: _____ Profile Number: _____.

Forms, Documentation, and Costs to be Included with Form 30

(For Department Use Only)

ATTENTION Department Secretary: After the Department Annual Report has been filed (Form 35 deadline = May 31) the continued use of one Form 30 for each affected Brother shall be forwarded to the National Executive Director by the 15th day of the next month after receipt from a Camp Secretary. Payment of per capita dues due the National Organization for a new or reinstated Brother (**Junior Members, Junior Associates, Life Members, Real Sons, nationally approved Honorary Members and Brothers in a War Zone are excluded**) must accompany this form. A copy of a new Brother's application (Form 3) **MUST** be attached. *Respectfully submitted in Fraternity, Charity, and Loyalty, [it is not necessary to submit these instructions with form 30.]*

A Form 30 is to be used for actions occurring between January 1 and December 31, except during the month of submittal of the Form 27.

A **Form 30** and associated documents should be forwarded by the camp to the Department Secretary in duplicate to arrive no later than the fifteenth day of the month following the change. The Department Secretary should the Report and associated documents to the National Executive Director no later than the fifteenth of the month after it was received from the camp.

	<i>Camp sends to Department</i>	<i>Dept sends to National</i>
<u>1. New Brother:</u>		
Form 30 (Original and one copy)	Orig + 1	Original
Completed application for membership (Form 3)	2	1
Copy of all supporting documentation must accompany this form. (Member and Junior, only)	2	1
Application Fee (1/2 of Camp/Department Application Fee, at least \$5.00)	\$5.00	\$5.00
Pro-rated National Per Capita (<i>Juniors, Junior Associates, Life Members, and "Real Sons" are exempt from National per capita</i>)		
For a brother who joins between January 1 and March 31:	\$33.00	\$33.00
For a brother who joins between April 1 and June 30:	\$24.75	\$24.75
For a brother who joins between July 1 and September 30:	\$16.50	\$16.50
For a brother who joins between October 1 and December 31:	\$8.25	\$8.25
Department Per Capita (as determined by your Department)	As required	N/A
3 and 4. DUAL MEMBERSHIPS: <i>Remit quarterly rate above, but not application fee</i>		
<u>2. Reinstated Brother:</u>		
Form 30 (Original and one copy)	Orig + 1	Original
Reinstatement Fee all year long	\$10.00	\$10.00
National Per Capita do not pro-rate	\$33.00	\$33.00
Department Per Capita (as determined by your Department)	As Required	N/A
<u>5. Change of Status:</u>		
From Associate to Member:		
Form 30	Orig + 1	Original
Completed application for membership (Form 3)	2	1
Copy of all supporting documentation must accompany this form.	2	1
From Junior to Member:		
Form 30 – Must have reached fourteenth birthday.	Orig + 1	Original
From Junior Associate to Associate:		
Form 30 – Must have reached fourteenth birthday.	Orig + 1	Original
<u>6. Discharged Brother:</u>		
Form 30 (Be sure to include date of discharge and type)	Orig + 1	Original
<u>7. Brother's resignation from Camp</u>		
Form 30 (Be sure to indicate Camp Number and Date)	Orig + 1	Original
<u>8. Deceased Brother</u>		
Form 30 (Be sure to include date of death)	Orig + 1	Original
<u>9. Brother's Change of Address:</u>		
Form 30 (showing NEW address. Include date of birth for identification purposes)	Orig + 1	Original
<u>10. Brother Transferring:</u>		
Losing Camp:		
Form 30 (indicating "Transfer Out" and gaining camp)	Orig + 1	Original
Form 4 (copy- as completed by gaining camp)	2	1
Gaining Camp:		
Form 30 (indicating "Transfer In" and losing camp)	Orig + 1	Original
Form 4 (copy- as completed by losing camp)	2	1

Department Secretaries - Mail Form 30 to:
SUVCW National HQ
1 Lincoln Circle at Reservoir Park
Suite 240 (Nat'l Civil War Museum Bldg.)
Harrisburg PA 17103-2411.