192311451 2-2-05



Form 2, Rev 4/2/01

APPLICATION FOR MEMBERSHIP OR TRANSFER SONS IN RETIREMENT

A Non-Profit Public Benefit Corporation For Retired Men Devoted to the Promotion of Independence and Dignity of Retirement

<u></u>	Lake of	the Pine's	Branch	170
		Branch Name		No.
Please print the	following inform	nation so we can he	elp you become a part	of SIR
DON	E	VENKIN	Nickname (Call me)	CADOL
Your first name	Initial	Last Name	Nickname (Call me)	Wife's sa Post-or's first name
2406	7 Fucal	uptus ct.	Airballer	0 - 100 - 00
24067 EUCOLYPTUS CT. Home Address (Street, No., Apt)			City	
			,	Zip Code
Mailing Address (if	different than your Ho	me Address)	INK. HET City 3-8-4	7 Zip Code
(530) 268-1	0951 don	anlake Dusa	mestra to	9-14-02
Tel. Area Tel. Numbe	er	E-Mail	Birth Date	Wedding Anniversary
		_	_	
I attended a lunch	eon meeting o	n: <u>(-5-05</u>	and I have ret essential for continued	ired from full time
employment. I am	aware that reg	ular attendance is	essential for continued	d membership.
Mark		_	1	P
Applicant' Sig		1-5-05 Date	Mr.	ame
, 0		Date .	Sponsor's Signatu	ire Badge Number
I am	a new member.	11	I am transferring from:	
				Branch Number
delivides.			to new friends and ma	
Former Business (Connection:	diministra	or State of	FCA
		Occupation	Company	or Organization
Date you retired:	3-17-	04		-
_		<u> </u>		
What are vour Hob	bies and Intere	setes Caple	-, Tennis	, Travel.
EBAY		000:	- , every	1 vavel
/	For Members	hip Committee Cha	airman:	
			-	
			~~~	
			Date:	-2-05