



**Change of Membership Status
ANSC 7035/7056**

October 1, 2023

Form 7035 is to be used when a member wishes to retire (after 15 years of service), inform the Auxiliary of a deceased member, disenrollment by a member's request or disenrollment for nonpayment of dues.

Form ANSC 7056 is to be used for all transfers



SAMPLE FORMS—please print all information except signatures

**IF Possible,
Submit with
ID Card
Scanned Here**

RETIREMENT REQUEST

U. S. COAST GUARD AUXILIARY CHANGE OF MEMBERSHIP STATUS

Completed by Flotilla Commander

To: LAST NAME	FIRST NAME AND MIDDLE INITIAL	MEMBER ID
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This Section must be Filled Out

As provided in the Auxiliary Manual, COMDTINST M16790.1 (Series), you will be recommended for disenrollment from the Auxiliary for non-payment of Financial Obligations for or since the year _____ amounting to \$ _____, unless the full amount is received by your Flotilla Commander within thirty (30) days from the date of this notice. You will not be eligible to remain a member of this flotilla, transfer to another flotilla or seek Retired Member status, until your financial obligations are met.

SECTION I – To be completed by Flotilla Commander

Flotilla Commander _____	Date of Notice _____
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SECTION II - To be completed by Member

To: FLOTILLA Flotilla # Must be Entered Date _____

☐ An amount to pay my Financial Obligation is enclosed. I want to remain in Flotilla _____

☒ I desire Retired Member status. My date of enrollment is 15 Years Served

☐ I desire to transfer to Flotilla _____ in this district. (Complete MEMBER TRANSFER REQUEST, ANSC 7056, and attach to this form.)

☐ I desire to disenroll. My Reason(s) is/are _____
(Prioritize up to 3 reasons– high to low – use codes from Page 2 in boxes below. Explain "Other" on line above)

☒ My membership card is enclosed. Member signature: No Initials or Font Signatures

SECTION III - To be completed by Flotilla Commander

To: DSO-HR _____

☐ Recommend disenrollment effective ASAP-No Future Date can be Processed

☐ for Non-payment of Financial Obligations. ☐ at Member's Request.

Member desires and is eligible for Retired Member status: ☒ Yes ☐ No

☐ Death of member. _____

☐ Name and address of next of kin: _____

No Initials or Font Signature

Flotilla Commander (Required) _____	Date _____	Division Commander (Optional) _____
Date _____	Date _____	Date _____

If ID Cards are not obtainable FC should indicate on the Member ID Card Form

Route -- Flotilla Commander – DSO-HR via D7 Help Desk



DECEASED MEMBER NOTIFICATION

DECEASED MEMBERS WILL NOT BE HONORED UNLESS AN ANSC 7035 IS SUBMITTED WITH THE PERTINENT INFORMATION

**If Possible,
Submit with ID
Card Scanned
Here**

U. S. COAST GUARD AUXILIARY CHANGE OF MEMBERSHIP STATUS

Flotilla Commander

This Section Must be Filled Out

As provided in the Auxiliary Manual, COMDTINST M16790.1 (Series), you will be recommended for disenrollment from the Auxiliary for non-payment of Financial Obligations for or since the year _____ amounting to \$ _____, unless the full amount is received by your Flotilla Commander within thirty (30) days from the date of this notice. You will not be eligible to remain a member of this flotilla, transfer to another flotilla or seek Retired Member status, until your financial obligations are met.

SECTION I - To be completed by Flotilla Commander

No Initials or Font Signature

Flotilla Commander

Date of Notice

SECTION II - To be completed by Member

To: FLOTILLA **Flotilla # Must be Entered** Date

- ☐ An amount to pay my Financial Obligation is enclosed. I want to remain in Flotilla _____
- ☐ I desire Retired Member status. My date of enrollment is _____
- ☐ I desire to transfer to Flotilla _____ in this district. (Complete MEMBER TRANSFER REQUEST, ANSC 7056, and attach to this form.)
- ☐ I desire to disenroll. My Reason(s) is/are _____
(Prioritize up to 3 reasons- high to low - use codes from Page 2 in boxes below. Explain "Other" on line above)

☒ My membership card is enclosed. Member signature _____

SECTION III - To be completed by Flotilla Commander

To: DSO-HR _____

- ☐ Recommend disenrollment effective _____
 - ☐ for Non-payment of Financial Obligations. ☐ at Member's Request.
- Member desires and is eligible for Retired Member status: ☐ Yes ☐ No
- ☒ Death of member.
- ☐ Name and address of next of kin: _____

Name of Deceased

**Date of Death, Name, Address and
Relationship of Next of Kin**

Flotilla Commander (Required)

Date

Division Commander (Optional)

Date

**If ID Cards are not obtainable
FC should indicate on the
Member ID Card Form**

**This information is forwarded
to the District Commodore and
DIRAUX for a letter of
condolence which is sent to the
family by their office.**

Route -- Flotilla Commander -- DSO-HR via D7 Help Desk

SAMPLE LETTER TO DECEASED MEMBER FAMILY REQUESTING RETURN OF ID MEMBER CARD

**EMAIL TO DECEASE NEXT OF KIN TO RETRIEVE
AUXILIARY ID CARD Created by Robert DiPaolo, FSO-
FN Flotilla 52**

Dear (Name of Next of Kin)

We apologize for this request during your difficult time but the Flotilla Commander of (Flotilla #) has assigned me the uncomfortable task of contacting the family of (first name of deceased) for the purpose of retrieving (first name of deceased) USCG Auxiliary ID card. If you are in possession of the card, despite its condition, we are requesting the card be returned to:

(Name and address of FC)

If the card is not available, please email reply to (email address of FC) and indicate "LOST". We will record that as being the case for nonreturn.

Under the USCG US Code, we are required to request return of USCG Auxiliary ID cards, which remain property of the USCG, after expiration of membership for whatever reason.

Again, we apologize for this inconvenience to you and family.

With deepest respect,



MEMBER TRANSFERS – OUTSIDE DISTRICT 7

All transfers are submitted with the ANSC 7056 only

DEPARTMENT OF
HOMELAND SECURITY
U. S. COAST GUARD
ANSC-7056 (03-23)

U. S. COAST GUARD AUXILIARY

MEMBER TRANSFER REQUEST

☐ Within District
☒ Outside District
Page 1 of 2

SECTION 2 - Transfer Outside District (electronic signatures and email transmission authorized)

a. I, **PRINT LAST, FIRST NAME** || **SIGNATURE MUST BE WRITTEN - NO FONT SIGNATURES ACCEPTED**

7 DIGIT # || **request transfer.** **Effective Date** **NO FUTURE DATES ACCEPTED**

From Flotilla **4 Digit #** **istrict** **See Below** **To Flotilla** **District** **See Page Below**

I can be contacted or email during the transfer process.

b. Current Flotilla Commander

SIGNATURE MUST BE WRITTEN - NO FONT SIGNATURES ACCEPTED

Recommend ☐ Approval ☒ Disapproval **(Reason for Disapproval)**

District # 013=D1 North/ 014=D1 South/053=D5 North/ 054=D5 South/070-D7/081-D8 Coastal/082-D8 Eastern/ 085-D8 Western Rivers/ 091=D9 Central/ 092=D9 East/ 095=D9 West/113-D11 North/ 114-D11 South/130=D14/ 170=D17

Current Flotilla Commander recommends approval and verifies that the member is in good standing with all dues paid and any flotilla and CG property returned. If not approved, reason must be given.

c. Receiving Flotilla Commander

SIGNATURE MUST BE WRITTEN - NO FONT SIGNATURES ACCEPTED

I have been in contact with the transferring Auxiliarist and recommend ☐ Approval ☐ Disapproval **(Reason for Disapproval)**

Member fills out this section and sends the form to their current FC.

The current FC fills out this section, sends the form to the receiving FC. The receiving FC returns the signed form to the current FC. The current FC sends to their DIRAUX for approval and processing. District 7 cannot process another district's transfers.

d. Current Director of Auxiliary

☐ Approved ☐ Disapproved
(Reason for Disapproval)

e. Receiving Director of Auxiliary

☐ Approved ☐ Disapproved
(Reason for Disapproval)

MEMBER TRANSFERS – WITHIN DISTRICT 7



All transfers are submitted with the ANSC 7056 only

DEPARTMENT OF HOMELAND SECURITY U. S. COAST GUARD ANSC-7056 (03-23)	U. S. COAST GUARD AUXILIARY MEMBER TRANSFER REQUEST ELECTRONIC SIGNATURES ARE NOT FONT SIGNATURES	<input checked="" type="checkbox"/> Within District <input type="checkbox"/> Outside District Page 1 of 2
SECTION 1 - Transfer Within District (electronic signatures and email transmission authorized)		
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">a. 1. PRINT LAST, FIRST NAME <small>LAST, FIRST, MI</small> 7 DIGIT # <small>MEMBER NUMBER</small> From Flotilla 4 DIGIT # To Flotilla 4 DIGIT #</div><div style="width: 50%; text-align: right;">SIGNATURE MUST BE WRITTEN - NO FONT SIGNATURES ACCEPTED <small>SIGNATURE</small> request transfer. Effective Date NO FUTURE DATES ACCEPTED</div></div>		
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">b. Current Flotilla Commander PRINT LAST, FIRST NAME <small>LAST, FIRST, MI</small> Recommend <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval <small>(Reason for Disapproval)</small></div><div style="width: 50%; text-align: right;">SIGNATURE MUST BE WRITTEN - NO FONT SIGNATURES ACCEPTED <small>SIGNATURE</small> <small>DATE</small></div></div>		
<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"><p>Auxiliarist fills out Section 1a and sends the form to their current FC. The current FC fills out this section and send the form the receiving FC.</p></div>		
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">c. Receiving Flotilla Commander PRINT LAST, FIRST NAME <small>LAST, FIRST, MI</small> Recommend <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval <small>(Reason for Disapproval)</small></div><div style="width: 50%; text-align: right;">SIGNATURE MUST BE WRITTEN - NO FONT SIGNATURES ACCEPTED <small>SIGNATURE</small> <small>DATE</small></div></div>		
<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"><p>The receiving FC fills out this section and sends the form to DIRAUX via D7 Help Desk for processing.</p></div>		
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">d. Current Director of Auxiliary <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <small>(Reason for Disapproval)</small></div><div style="width: 50%;"></div></div>		
<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"><p>Once processed, DIRAUX notifies the DSO-HR who then notifies the recipient of the ticket.</p></div>		

U. S. COAST GUARD AUXILIARY
MEMBER TRANSFER REQUEST
INSTRUCTIONS

1. This form shall be used to process an Auxiliarist's request to transfer from one flotilla to another. Before you can fill out this form, either electronically or manually, you must check "Within District" - or - "Outside District" to bring up the proper format for the actions required."

2. Filling in blanks.

- Name, signature, and date:** Print last name, first name and middle initial as they appear on the Auxiliary ID card. Sign (manual or electronic certificate signature acceptable) and date.
- Member ID number:** Enter the 7-digit Auxiliary member number as it appears on the Auxiliary ID card.
- Flotilla number:** Enter the flotilla's 4-digit number (e.g., 08-04, 10-05).

District # 013=D1 North/ 014=D1 South/053=D5 North/ 054=D5 South/070-D7/081-D8 Coastal/082-D8 Eastern/085-D8 Western Rivers/ 091=D9 Central/ 092=D9 East/ 095=D9 West/113-D11 North/ 114-D11 South/130=D14/ 170=D17
Current Flotilla Commander recommends approval and verified that the member is in good standing with all dues paid and any flotilla and CG property returned. If not approved, reason must be given.

- Reason for Disapproval:** Briefly explain reason for recommended/final disapproval. Attach separate sheet if narrative is extensive. Reasons for disapproval include delinquency in financial obligations (e.g., dues), incomplete accounting or transfer of assigned property, is subject of administrative investigatory or disciplinary actions, or has a documented history of being a disruptive influence to Auxiliary personnel and/or programs.

3. Routing the Form. (via mail or email as a PDF attachment acceptable).

a. **Section 1 – Request to Transfer Within District.**

- Auxiliarist fills out this section and sends the form to their current FC.
- The current FC fills out this section, sends the form to the receiving FC, and also sends a copy to the current DCDR.
- The receiving FC fills out this section, sends the form to the receiving DIRAUX, and also sends a copy to the receiving DCDR.
- The current DIRAUX fills out this section, makes their decision on approval, and notifies the Auxiliarist and both FCs. Both FCs should then notify their respective DCDRs.

b. **Section 2 – Request to Transfer Outside of District.**

- Auxiliarist fills out this section and sends the form to their current FC.
- The current FC fills out this section and sends the form to the receiving FC and also sends a copy to the current DCDR.
- The receiving FC fills out this section, sends the form back to the current DIRAUX, and also sends a copy to the receiving DCDR and receiving DIRAUX. Note the receiving FC must attest to having been in contact with the Auxiliarist requesting the transfer.
- The current DIRAUX fills out this section, makes their decision on approval, sends the form to the receiving DIRAUX, and notifies the Auxiliarist and both FCs (email notification and/or email transmission of the form is acceptable).
- The receiving DIRAUX fills out this section, makes their decision on approval, and notifies the Auxiliarist, both FCs, and the current DIRAUX. If approved, the current DIRAUX shall then make the transfer in AUXDATA II and send the Auxiliarist's records to the receiving DIRAUX. Both FCs should then notify their respective DCDRs."

PRIVACY ACT STATEMENT

In accordance with 5 USC 552(a)(3), the following information is provided to you when supplying personal information to the United States Coast Guard:

- AUTHORITY** which authorized the solicitation of the information: 14 USC Sec 3901.
- PRINCIPAL PURPOSE(S)** for which information is intended to be used: To administer Auxiliary personnel transfers among Auxiliary units and record them in the Auxiliary information system of record, the Auxiliary Database II.
- ROUTINE USES** which may be made of this information: To facilitate and effect Auxiliary personnel transfers among Auxiliary units through appropriate notifications of Auxiliary unit leaders and the District Director of Auxiliary
- WHETHER OR NOT DISCLOSURE** of such information is mandatory or voluntary (required by law or optional) and the effects on the individual, if any, of not providing all or any part of the requested information: Disclosure of this information is voluntary, but failure to provide the information will prevent the transfer of Auxiliary personnel among Auxiliary units.



MEMBER DISENROLLMENT REQUEST

SAMPLE FORM —please print all information except signatures

DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD ANSC 7035 (09-18)	U. S. COAST GUARD AUXILIARY CHANGE OF MEMBERSHIP STATUS	
SECTION I - To be completed by Flotilla Commander		
To: LAST NAME	FIRST NAME AND MIDDLE INITIAL	MEMBER ID
This Section must be Filled Out		
As provided in the Auxiliary Manual, COMDTINST M16790.1 (Series), you will be recommended for disenrollment from the Auxiliary for non-payment of Financial Obligations for or since the year _____ amounting to \$ _____, unless the full amount is received by your Flotilla Commander within thirty (30) days from the date of this notice. You will not be eligible to remain a member of this flotilla, transfer to another flotilla or seek Retired Member status, until your financial obligations are met.		
SECTION I— To be completed by Flotilla Commander		
_____ Flotilla Commander		_____ Date of Notice
SECTION II - To be completed by Member		
To: FLOTILLA <u>Flotilla # Must be Entered</u> Date _____		
<input type="checkbox"/> An amount to pay my Financial Obligation is enclosed. I want to remain in Flotilla _____		
<input type="checkbox"/> I desire Retired Member status. My date of enrollment is _____		
<input type="checkbox"/> I desire to transfer to Flotilla _____ in this district. (Complete MEMBER TRANSFER REQUEST, ANSC 7056, and attach to this form.)		
<input checked="" type="checkbox"/> I desire to disenroll. My Reason(s) is/are <u>See Page 6</u> <i>(Prioritize up to 3 reasons- high to low - use codes from Page 2 in boxes below. Explain "Other" on line above)</i>		
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<input checked="" type="checkbox"/> My membership card is enclosed. Member signature _____		
No Initials or Font Signature		
SECTION III - To be completed by Flotilla Commander		
To: DSO-HR <u>D7</u>		
<input type="checkbox"/> Recommend disenrollment effective <u>ASAP-No Future Date can be Processed</u>		
<input type="checkbox"/> for Non-payment of Financial Obligations. <input checked="" type="checkbox"/> at Member's Request.		
Member desires and is eligible for Retired Member status: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Death of member. _____		
<input type="checkbox"/> Name and address of next of kin: _____		
_____ No Initials or Font Signature		_____ Signature Required in District 7
Flotilla Commander (Required)	Date	Division Commander (Optional) Date

The signature of the FC verifies that all the information is correct -- if eligible for retirement, that option is presented to the member. If no ID Card is returned, the FC signs both the ANSC 7035 and the "Return of US Coast Guard Auxiliary ID Card." For all disenrollments, the form is then dated, scanned and sent to the DCDR for their signature. The DCDR submits it to the DSO-HR via the D7 Help Desk. If the ID Card is returned, the FC should scan the ANSC 7035 along with the Member ID Card only for either Retirement or Member Deaths.

MEMBER DISENROLLMENT REQUEST

SAMPLE FORM —please print all information except signatures

Instructions for AN SC 7035 (09-18)

CHANGE OF MEMBER STATUS

A. GENERAL - This form is used to remove a member from the flotilla rolls by disenrollment, transfer or retirement.

B. SECTION I - To be completed by the Flotilla Commander.

1. Enter member's last name.
2. Enter member's first name and middle initial.
3. Enter member's ID number.
4. Enter year and amount of any outstanding debts, if applicable.
5. Flotilla Commander sign and date.

C. SECTION II - To be completed by member.

1. Enter the flotilla number and the date of response.
2. The member must check the box opposite the desired response and complete any other information required.*
3. Member signature required.

* If the member desires to disenroll, provide one or more reasons from the list below in Section II on page 1.

- 1 Job Related
- 2 Health Issues
- 3 Time Conflicts
- 4 Moved
- 5 Non-Payment of Dues
- 6 Lost Interest
- 7 Member Request No Reason
- 8 Going back to School
- 9 Personal No other reason
- 10 Active Duty
- 11 Did Not Feel Welcomed
- 12 Flotilla Disbanded
- 13 Too Expensive
- 14 Auxiliary Issues: none specific
- 15 Poor Leadership
- 16 Unfriendly Members
- 17 Lack of Mentorship
- 18 Lack of Need By Active Duty
- 19 Lack of Recognition
- 20 Too Military
- 21 Not Military Enough
- 22 Too Many Meetings
- 23 Other (Provide a reason on page 1)

Select a reason for disenrollment to be entered in Section II

D. SECTION III - To be completed by Flotilla Commander.

1. Enter DSO-HR's district number.
2. The flotilla commander must check the box opposite the desired response and complete any additional information required.
3. Flotilla Commander must sign and date this response.
4. The Division Commander's signature is optional per district policy.

E. SECTION IV - To be completed by DSO-HR.

1. The DSO-HR must check the box opposite the response desired and complete any other information required.
2. The DSO-HR must sign and date the response.

F. SECTION V - To be completed by the Director of Auxiliary (DIRAUX).

1. Enter the Division and Flotilla numbers on the appropriate line.
2. The DIRAUX must check the box opposite the response desired and complete any additional information required.
3. The DIRAUX must sign and date the response.



United States Coast Guard Auxiliary
U.S. Department of Homeland Security

America's
Volunteer
Guardians
Since 1939

ISSUANCE OF USCG AUXILIARY MEMBERSHIP ID CARD

I have read the Notice included below and understand the USCG Auxiliary Membership Card issued to me is the property of the United States Coast Guard and upon my disenrollment, retirement or death; it will be my duty, or that of my next of kin, to return this card to my flotilla commander. Continued possession of an ID card after your membership in the Auxiliary terminates is against the law and could result in criminal penalties. You may wish to review Section 701 of Title 18 of the US Code for additional information. Your card remains the property of the United States Coast Guard even if it has expired or been defaced and must still be returned.

Member Signature _____


Signature of Interviewer _____

Date _____

Date _____

Notice on Back of Member ID Card

DATE OF BIRTH	WEIGHT	HEIGHT	HAIR COLOR	EYE COLOR
██████████	██████████	██████████	██████████	██████████

AUTHORIZED PATRONAGE COAST GUARD EXCHANGE/MWR				
DATE OF ISSUE	EXP. DATE	BLOOD TYPE	GENEVA CONV CATEGORY	
██████████	██████████	██████████	██████████	

This card is the property of the United States Coast Guard, and is issued for official purposes and for identification only. Improper use, possession, or alteration is subject to the penalties under Title 18, USC499, 506, and 701. If found, return to:
Commandant
U.S. Coast Guard (CG-BSX-1)
2100 2nd Street SW, STOP 7581
Washington, DC 20593-7581
Return Postage Guaranteed

COAST GUARD AUXILIARY performs essential duties for the Federal Government in support roles to the UNITED STATES COAST GUARD in non-law enforcement and non-combat roles such as search and rescue missions, boating education, vessel safety checks, environmental protection missions and aids to navigation. Please provide any assistance necessary to the bearer of this card in reaching his/her duty assignment. Authorized medical care while under competent orders.

REV 1 JAN 13

GENEVA CONVENTIONS IDENTIFICATION CARD - FORM 2650A

NON-MILITARY ID

TO BE PRESENTED TO THE APPLICANT AT THE TIME OF INTERVIEW - SUBMITTED WITH THE ANSC 7001 AND KEPT IN MEMBER JACKET

Photo of the back of a Member ID Card

This card is the property of the United States Coast Guard, and is issued for official purposes and for identification only. Improper use, possession, or alteration is subject to the penalties under Title 18, USC499, 506, and 701.

If found, return to:

Commandant

U.S. Coast Guard (CG-BSX-1)

2100 2nd Street SW, STOP 7581

Washington, DC 20593-7581

Return Postage Guaranteed

REV 1 JAN 13



TO BE SUBMITTED WITH ALL ANSC 7035 REQUESTS



United States Coast Guard Auxiliary
U.S. Department of Homeland Security

America's
Volunteer
Guardians
Since 1939

DATE: _____

TO: Auxiliary Member _____

Name _____

ID Number _____

SUBJECT: Return of US Coast Guard Auxiliary ID Card

Please be advised your USCG Auxiliary Membership Card is the property of the United States Coast Guard and it is mandatory that you return this card to your Flotilla Commander. Continued possession of an ID card after your membership in the Auxiliary terminates is against the law and could result in criminal penalties. You may wish to review Section 701 of Title 18 of the US Code for additional information.

Your card remains the property of the United States Coast Guard even if it has expired or been defaced and must still be returned.

If you are unable to locate or have lost this card you will be responsible should this card be used.

_____ I affirm that I have made a search but am unable to locate my ID Card.

_____ I never received an ID Card.

_____ My card is enclosed.

_____ Date _____

Member signature

A stamped self-addressed envelope is enclosed for the return your card and this letter. If you need further clarification, please contact me. Thank you

Respectfully,

Flotilla Commander Signature _____

Flotilla Commander Verification

I verify the following:

ID Card Never Received - FC should initial

_____ I have destroyed this member's ID Card

_____ I have have made a number of attempts to retrieve this member's ID Card with no response

Flotilla Commander Signature _____

This form is to be sent with the dues notice.

Flotilla Commander should note if "attempts made to retrieve ID Card - N/R" is indicated on the ANSC 7035, either a letter (from the DIRAUX) or telephone call to the member insuring that the card is no longer in their possession. If the member was never notified to submit the ID Card, the FC will be held responsible.



DISENROLLMENT NON-PAYMENT OF DUES

SAMPLE FORM —please print all information except signatures

Each Flotilla sends out a dues notice with a due date for payment. Dues notification must be sent individually to husband-and-wife members.

If the member has not responded with payment, the ANSC 7035 along with a second notice is mailed to the member with the “Return of US Coast Guard Auxiliary ID Card” Form via CERTIFIED MAIL with RETURN RECEIPT REQUESTED.

SECTION II –if a member wishes to remain in the Auxiliary, it should be indicated by their signature and payment of dues. PER THE FLOTILLA PROCEDURES MANUAL, THE FC SHOULD MAKE EVERY EFFORT TO CONTACT AND RETAIN THE MEMBER. IF MEMBER IS ELIGIBLE FOR RETIREMENT, A RETIREMENT REQUEST SHOULD BE SUBMITTED.

SECTION I – FC fills in the necessary information, signs and dates form.

SECTION III - If no response is received after 30 days, the FC indicates disenrollment, signs, dates and submits, ANSC 7035, the Member ID Card Form, with the completed CERTIFIED MAILING RECEIPT along with either a returned signed green card, returned envelope or USPS Tracking Sheet indicating DELIVERED and member's ID Card if available, to the Division Commander who signs, dates and submits to the DSO-HR via the D7 Help Desk . If the envelope is returned marked “undeliverable,” that should be submitted with the request. If there is no response, the USPS Tracking Sheet indicating DELIVERED should be submitted. The completed Certified Receipt Stub must be submitted with all disenrollment for non-payment of dues requests

DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD ANSC 7035 (09-18)	U. S. COAST GUARD AUXILIARY CHANGE OF MEMBERSHIP STATUS		
SECTION I - To be completed by Flotilla Commander			
To: This Section Must be Filled Out		MEMBER ID	
As provided in the Auxiliary Manual, COMDTINST M16790.1 (Series), you will be recommended for disenrollment from the Auxiliary for non-payment of Financial Obligations for or since the year _____ amounting to \$ _____, unless the full amount is received by your Flotilla Commander within thirty (30) days from the date of this notice. You will not be eligible to remain a member of this flotilla, transfer to another flotilla or seek Retired Member status, until your financial obligations are met.			
SECTION I - To be completed by Flotilla Commander			
No Initials or Font Signature		Date of Notice	
SECTION II - To be completed by Member			
To: FLOTILLA Flotilla # Must be Entered		Date	
<input type="checkbox"/> An amount to pay my Financial Obligation is enclosed. I want to remain in Flotilla _____ <input type="checkbox"/> I desire Retired Member status. My date of enrollment is _____ <input type="checkbox"/> I desire to transfer to Flotilla _____ in this district. (Complete MEMBER TRANSFER REQUEST, ANSC 7056, and attach to this form.) <input type="checkbox"/> I desire to disenroll. My Reason(s) is/are _____ (Prioritize up to 3 reasons- high to low - use codes from Page 2 in boxes below. Explain "Other" on line above) <input checked="" type="checkbox"/> My membership card is enclosed. Member signature _____			
SECTION III - To be completed by Flotilla Commander			
To: DSO-HR D7			
<input type="checkbox"/> Recommend disenrollment effective ASAP-No Future Date can be Processed <input checked="" type="checkbox"/> for Non-payment of Financial Obligations. <input type="checkbox"/> at Member's Request. Member desires and is eligible for Retired Member status: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Death of member. <input type="checkbox"/> Name and address of next of kin: _____			
No Initials or Font Signature		Signature Required in District	
Flotilla Commander (Required)		Division Commander (Optional)	
Date		Date	

The FC verifies that all the information is correct by entering their signature.

DISENROLLMENT NON-PAYMENT OF DUES



SUBMISSION OPTIONS

Certified Mail Receipt obtained at the local US Post Office must be completed with full address—NO P.O. Box address will be processed except for Virgin Islands.

Stub must be submitted with all disenrollment for non-payment of dues requests

Option 1—Signed Green Card

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Must Contain Member's Address

2. Article Number (Transfer from service label)

3. Service Type

Must Contain Member's Signature

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☐ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

***The Member ID Card Form Must be submitted with all options.**

Option 2 —Returned Enveloped Marked “Undeliverable” or “Return to Sender”

U.S. COAST GUARD AUXILIARY

U.S. POSTAGE PAID SAINT PETERSBURG, FL 33711

FL 3 20 C 54N 5

U.S. POSTAL SERVICE

33710 R2304H108523-12

\$3.84

10-27 11-4-17

NO P.O. Box Addresses can be processed EXCEPT VIRGIN ISLANDS

CERTIFIED MAIL

RETURN TO SENDER UNCLAIMED UNABLE TO FORWARD

UNC

BC: 35711372620 *2781-00562-20-42

8811/16/17

1017 1070 0000 5135 4393 33710-325956



DISENROLLMENT NON-PAYMENT OF DUES

Option 3—Track & Confirm Sheet

If the green card or a non-deliverable envelope is not returned, a Track & Confirm Sheet can be obtained from the USPS Website.

WWW.USPS.COM

USPS.COM®

Quick Tools Mail & Ship Track & Manage Postal Store Business International Help

USPS Tracking®

Enter Certified Receipt #

70171070000051354409

Click Track

Tracking FAQs

Track

Tracking Sheets indicating “IN TRANSIT” will not be accepted

USPS.COM®

Quick Tools Mail & Ship Track & Manage Postal Store Business International Help

USPS Tracking®

Tracking FAQs

Track Another Package +

Tracking Sheet must indicate “DELIVERED”

Tracking Number: 70171070000051354409 Remove X

Status

✓ Delivered

Your item was picked up at a postal facility at 7:41 am on October 24, 2017 in SAINT PETERSBURG, FL 33710.

October 24, 2017 at 7:41 am
Delivered, Individual Picked Up at Postal Facility
SAINT PETERSBURG, FL 33710

Print and Submit with Certified Receipt and ANSC 7035 Member ID Card Form



MEMBER DISENROLLMENTS OR DISENROLLMENT NON-PAYMENT OF DUES

The following check list can be used when submitting either a Member Disenrollment or Disenrollment for Non-Payment of Dues. It can be found in the HR Corner.

ANSC 7035 SUBMISSION CHECK LIST

DISENROLLMENT FOR NON-PAYMENT OF DUES

Section I

____ Name
____ Member #

Section II

____ Flotilla #
____ Member Signature
X ____ Member ID Card Enclosed
____ Indicate reason for omission
of ID Card

Scanned on 7035

Section III

____ FC Signature
____ DCDR Signature
____ Certified Receipt – Signed Green Card
____ Returned Envelope – Undeliverable
____ Certified Receipt with USPS Tracking
Sheet

____ **Member ID Card Form**

Member Disenrollment

Section I

____ Name
____ Member #

Section II

____ Flotilla #
____ Member Signature
X ____ Member ID Card Enclosed
____ Indicate reason for omission
of ID Card

Scanned on 7035

Section III

____ FC Signature
____ DCDR Signature

____ **Member ID Card Form**



7035/7056 Issues Resulting in Rejected Ticket

Failure to submit the “Return of US Coast Guard Auxiliary ID Card Form will result in the return of the documents.”

DCDR Signature is Required for all Disenrollments – indicated optional on the form – **required in District 7**. The Signature of the DCDR indicates all has been checked and approved. If the DCDR chooses to use a digital signature, the following one is the only acceptable signature that can be used: **BE SURE SIGNATURE IS NOT LOCKED**

ONLY ACCEPTABLE DIGITAL SIGNATURE



Flotilla # - Flotilla # must be entered on all requests.

Member's Signature on Member Request for Disenrollment – required as proof of intent to disenroll – either on the form, a letter of intent or an email from member's computer. **No initials or font signature will be accepted**

TRANSFER INFORMATION

District 7 DIRAUX cannot process transfers into District 7. This is to be processed by the outgoing District DIRAUX

FC's Signature on ANSC 7056 Transfer Requests, **OUTSIDE DISTRICT 7**
Transfer requests are routed from the member to the member's FC for his/her signature indicating all dues are paid and flotilla equipment has been returned to the flotilla. The current FC fills out Section 1a and sends to the receiving FC. The receiving FC fills out Section 1b and sends it to the current DIRAUX. The current DIRAUX fills out this section, makes their decision on approval, sends the form to the receiving DIRAUX. If approved, the current DIRAUX processes the transfer and notifies the member. **WITHIN DISTRICT 7** Auxiliarist fill out Section 1a, sends the form to the receiving FC. The receiving FC fills out Section 1b and submits to DIRAUX via D7 Help Desk for processing. Once processed, the member is notified through the DSO-HR.



The Don'ts of Submission of the ANSC 7035/7056

ID Card or Explanation for Omission – If available, all member deaths and retirement requests should be scanned with a copy of the member ID card placed in the upper left corner of the 7035 or on the Member ID Card Form. **The “Return of US Coast Guard Auxiliary ID Card” Form must be completed and submitted with all ANSC 7035 requests.**

For security reasons, every effort should be made by the FC to retrieve the member's ID Card. This card is the property of the US Government not the member.

D7 Help Desk Tickets must be submitted for each member. Multiple requests in a ticket will be returned.

All forms must be scanned in a PDF Format — **no JPEG OR WORD scans will be accepted**

No ANSC 7028 should be submitted with any ANSC 7035/7056. These forms are processed by the FSO-IS Officer.

Certified Receipt — A completed Certified Receipt must accompany all disenrollments for non-payment of dues along with either the signed green card, returned envelope or tracking sheet indicating “DELIVERED.”

All Change of Membership Status requests must be submitted to the DSO-HR via D7 Help Desk —All requests sent directly to DIRAUX or DSO-HR will be returned.

Member Name should be entered in Subject of D7Help Desk Ticket and submitted in the proper category.

Deceased member information should include **DATE OF DEATH, RELATIONSHIP AND ADDRESS OF THE NEXT OF KIN. If possible, a photo of the deceased member should be submitted with the ANSC 7035 for the “Crossing of the Bar” Presentation that is held at D-TRAIN**

Reinstatement Requests – if a member wishes to be reinstated within 3 months of disenrollment, only Page 1 of the ANSC 7001 should be submitted.



7035/7056 Issues

Member Name, Flotilla Number and Member ID must be filled in

Disenrollment of Members Eligible for Retirement – It is the responsibility of the FC to check that members being disenrolled are not eligible for retirement. If they are eligible, the option should be presented to the member.

Improperly submitted requests will be returned to the officer who submitted the request. A corrected copy should be resubmitted with **a new ticket** within a reasonable time with the necessary corrections to insure processing.

Help Desk Tickets returned for improper submission will be marked 'rejected' and removed from the D7 Help Desk, Open all tickets to check processing has been done or address issues stated in the returned ticket. Resubmit with a new ticket

No requests should be submitted prior to the effective date or submitted with an effective date of 12-31.

THE LAST DAY FOR THE SUBMISSION OF ALL ANSC 7035/7056 REQUESTS IS DECEMBER 15. NO REQUESTS RECEIVED AFTER THAT DATE WILL BE PROCESSED AS PER AD-11 – 10-15-09.

In an attempt to create a more efficient procedure, any questions regarding the filling out, submission or processing of the ANSC 7035/7056 forms should be addressed to the DSO-HR prior to submission to the D7 Help Desk

FSO-IS OFFICER SHOULD CHECK THAT ALL ACTIVITIES HAVE BEEN APPROVED AND CLOSED BEFORE ANY SUBMISSION

“Return of US Coast Guard Auxiliary ID Card, ANSC 7035 and 7056 Forms can be found on the District 7 Website in the HR Corner.



“In a Nutshell” by Division 11 Commander Jesse Scott

The processing of disenrollments can be daunting if you are unprepared, the answer can be found on the District 7 Web site in the HR Corner. There you will find the Procedures for the ANSC7035&7056 dated Sept.2016..

Key dates to remember:

- **September 30** – the last day of the fiscal year and the final date for the receipt of dues by the flotilla for coming year.
- **October 1** - the day you should be sending out certified letters to the members who have not paid their dues as of September 30 , of the present year.
- **November 1** - the day that you should be processing the paperwork for the disenrollment of members who have not responded to the October 1 certified mailing
- **December 15** - the last day for DCDR to send paperwork to DSO-HR. After that, the member will remain on the roster and the flotilla will be responsible for their dues for the coming year.

In District 7 all disenrollments must be signed by the Division Commander as well as the Flotilla Commander. So, make sure you send all disenrollments to your DCDR for his signature.

All disenrollments must be accompanied by the member's ID Card (if they have been issued one). If you cannot get the card, you must include an explanation on the ANSC7035 as per AD 11-1 dated 5/23/19. The DSO-HR and DIRAUX will not accept disenrollments without either the scanned ID card indicating it was destroyed and initialed or an explanation of the status of the card.

The October 1 reminder letters and forms must go out certified (see example of certified mail confirmation in the procedure). Remember to use Government stamps and check to confirm the address listed in the Aux Directory. Request stamps from your FSO-MA if you need them.

Each certified mailing needs to include the following:

1. A letter to the member reminding him/her about the dues and giving the option of paying their dues, disenrolling or retiring (if eligible).
2. The ANSC 7035 Form with Section 1 completed-see procedure for more detailed information (pages 6-10)
3. A self-addressed, stamped envelope to either the FC or FSO- FN. Again, use government stamps. Use the FC's or FSO-FN's address as both the return address as well as the addressee for this pre-addressed envelope.

Be sure to check the Aux Directory for their Base Enrollment Date (BED). If they meet or exceed 15 years, they should be processed as retirements.

Apply late fee penalty if appropriate in accordance with your standing rules or appendices.

A future effective date will not be processed. Do not submit an effective date of 12-31 for disenrollment; it cannot be processed on that date. The certified receipt should be saved and submitted with all Disenrollments for Non-payment of Dues

A D-7 Help Desk Ticket returned marked RESOLVED does not mean processed. All tickets should be opened and checked that the request has been processed.

Each request must be submitted with a separated-7Help Desk Ticket. Please don't hesitate to ask if you have any questions.