

Date \_\_\_\_\_

**Special Forces Association  
P. O. Box 41436  
Fayetteville, NC 28309-1436**

I, \_\_\_\_\_ SFA# \_\_\_\_\_ request transfer  
to \_\_\_\_\_  
(Print Full Name)

**GAINING CHAPTER: SFA Chapter D (500), Indianapolis, IN**

I am currently a member of Chapter \_\_\_\_\_. (If not currently a member  
of a Chapter, but a member of SFA, enter *NIA*)

My current address:

\_\_\_\_\_

Current PH#: \_\_\_\_\_ Cell # \_\_\_\_\_

E-Mail address: \_\_\_\_\_

\_\_\_\_\_  
Signature

**OTE: Distribution of the Transfer Request Form:**

- Send original to SFA Hqs (Address listed above)
- Copy to Losing SFA Chapter
- Copy to Gaining SFA Chapter (Address listed above)

THIS LETTER MAY BE USED FOR TRANSFER TO OR FROM CHAPTER **500**