

CHAPTER STATE DATE REPORT PREPARED PAGE

CHAPTER EMPLOYER IDENTIFICATION NUMBER		MEMBER CODE*	ACTIVE DUES	RESERVE DUES	SCHOLARSHIP FEES	INITIATION FEES	REINSTATEMENT FEES	HONORARY FEES		CHECK IF REPORTED ON FORM 18-A
FOR THE FISCAL YEAR	AS OF									
I.D. NUMBER	Name (Last name first) Dr., Miss, Mrs. (Please Print or Type)									
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\*MEMBER CODE: ACTIVE - A RESERVE - R HONORARY - H ACTIVE, DUES PAID FOR LIFE - AL RESERVE, DUES PAID FOR LIFE - RL

SUMMARY BY CHAPTER TREASURER			FOR CHAPTER USE ONLY			SUMMARY BY STATE TREASURER			FOR STATE USE ONLY			FOR INTERNATIONAL USE ONLY		
SUMMARIZE ON FIRST PAGE ONLY			DUE STATE & INTERNATIONAL			RETAINED BY STATE			PAID TO INTERNATIONAL			INC/EXP	COST CTR.	ST-CHAPTER
DUES, ACTIVE	No.	@				No.	@		No.	@	20.00=	84000	88888	
DUES, RESERVE	No.	@				No.	@		No.	@	10.00=	84001	88888	
SCHOL. FEES	No.	@	.40 OR 1.00=			No.	@	.20 OR .80=	No.	@	.20=	84002	88888	
INIT. FEES	No.	@	5.00=			No.	@	2.50=	No.	@	2.50=	84003	88888	
HON. INIT. FEES	No.	@	50.00=						No.	@	50.00=	84005	88888	
State Scholarship Fund - \$5.00			Scholarship Fund - \$5.00											
<b>TOTAL \$</b>			<b>TOTAL \$</b>			<b>TOTAL \$</b>						88888	88888	

CHAPTER TREASURER <u>DR. MISS MRS. MS.</u> STREET, RT. OR P.O. BOX _____ CITY, STATE, ZIP _____ CHAPTER NAME _____	STATE TREASURER <u>DR. MISS MRS. MS.</u> STREET, RT. OR P.O. BOX _____ CITY, STATE, ZIP _____ STATE NAME (GEOGRAPHIC) _____
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