

STATE TREASURER'S REPORT

FI 8-3

JUNIOR ORGANIZATIONS

REPORT # _____

DATE _____

TREASURER _____ STATE _____ DUES YEAR _____ TO _____ PAGE _____ of _____

Please Type

Late Fee : \$5.00 per club after December 1st annuallyN = New
R = Renew

Name of Organization	Counselor's Name, Address, City, Zip	JRK \$ 6	No. of Mem.	Dues \$ Amt	Late Fee	Club N or R

Sub Totals: _____

AMOUNT SENT HERewith TO NATIONAL HEADQUARTERS:

Total JRK \$ _____ Total Members _____ Total Dues \$ _____ Total Late Fees \$ _____

IMPORTANT: Send original to the National Headquarters. Make additional copies for state use.

I attest that all the information provided above is true and accurate to the best of my knowledge

Signature of Treasurer: _____