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 annually**

N = 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: _____