The Catholic Women's League of Canada

TELEPHONE: (204) 927-2310 EMAIL: membership@cwl.ca

PARISH COUNCIL REMITTANCE FORM FOR PER CAPITA FEES

The League's membership year runs from January 1st to December 31st. Per capita fees are due at national office by February 28th.

PARISH								
COUNCIL							FOR NAT	IONAL OFFICE USE ONLY
CITY /TOWN	N					Date:		
PERSON REI	MITTING							
DOCUMENT						Batch	:	
TITLE						Cound	cil Code:	
DIOCESE						Chequ	ie:	
TELEPHONE						Total:		
DATE								
	F MEMBERS PAYING FOR CURRENT YEAR NOT INCLUDE YOUR SPIRITUAL ADVISOR II	N THIS COUNT)						(a)
	NATIONAL PER CAPITA FEE	-	\$	25.00	PER MEMBE	R =	\$	(b)
	PROVINCIAL PER CAPITA FEE	x	\$		PER MEMBE	R =	\$	(c)
	DIOCESAN PER CAPITA FEE	x	\$		PER MEMBE	R =	\$	(d)
	тс	OTAL PER CAPITA	FEE RE		R CURRENT YEA	\R =	\$	(e)
	INSURANCE			0.50	PER MEMBI	ER		(f)
ADD FEES IN	NCLUDED IN THIS REMITTANCE FOR PREVIO	DUS YEARS (INCLUI	DE INSU	RANCE)				
	NUMBER OF MEMBERS PAYING	x	\$		PER MEMBE	R =	\$	(g)
ADD GIFT SI	UBSCRIPTION TO MAGAZINE FOR NON-ME	MBERS (SPIRITUAL	ADVISC	DRS, ETC)				
	NUMBER OF SUBSCRIPTIONS	X	\$	8.00		=	\$	(h)
			т		TANCE INCLUDE	D =	\$	(i)
								[November 202