

The Catholic Women's League of Canada

Telephone: 1-204-927-2310 E-mail: 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			FOR NATIONAL	OFFICE USE ONLY
COUNCIL			Date:	DITICE OSE ONET
CITY/TOWN			Batch:	
NAME OF PERSON			Council Code:	
NAME OF PERSON SUBMITTING THESE			Cheque:	
FEES			Total:	
TITLE				
DIOCESE				
ELEPHONE DATE			ATE	
NUMBER OF MEMBERS PAYING FOR 20 (NOTE: DO NOT INCLUDE YOUR SPIRITUAL				(a)
•		,	PER MEMBER = \$	
			PER MEMBER = \$	
DIOCESAN PER CAPITA FEE	x \$		PER MEMBER = \$	(d)
INSURANCE PER CAPITA FEE	x \$	0.45	PER MEMBER = \$	(e)
	2021 TOT/	AL PER CAPITA	FEE REMITTING = \$	(f)
ADD PREVIOUS YEARS DUES INCLUDED	O IN THIS REMITT	ANCE		
NUMBER OF MEMBERS PAYING	x \$		PER MEMBER = \$	(g)
ADD GIFT SUBSCRIPTION TO MAGAZIN	IE FOR NON-MEN	MBERS (SPIRI	TUAL ADVISORS, ETC)	
NUMBER OF SUBSCRIPTIONS	x \$	8.00	= \$	(h)
	-	OTAL DEMITTA	NCF INCLUDED = \$	(i)
				(1)