

Monthly Per Capita Adjustment and Membership Report

I.A.M.A.W. District Lodge 141

Financial Office

PO Box 117399

Burlingame, CA 94011-7399

Phone: 650-652-4788, Fax: 650-689-5644

Local Lodge:

Month:

2015

District Lodge 141 Affiliated Membership Count

Total District Lodge 141 Members this Report:

The District Secretary-Treasurer is instructed to use the above number to determine the amount of ballots to be forwarded to this local lodge and to determine this lodge's vote at the District Lodge Convention. Please include all dues paying, out-of-work, retired, exempt and life members in the above count.

Cash Payers, Per Capita Refund/Adjustment Reporting

1	Description	Count	Amount	Total
2	Collected Directly By Local Lodge (Cash Payers)			
3	Regular		\$ 18.76	-
4	Objector		15.73	-
5	Initiations/Reinstatements		\$ 15.00	-
6	Refunds from Dues Check Off (Provide Detail on Page 2):			
7	Regular		\$ (18.76)	
8	Objector		(15.73)	
9	Initiations/Reinstatements		\$ (15.00)	
10	Dues Objector PC Tax Adjustment From Dues Check Off:			
11	Objector (\$15.73 - \$18.76)		\$ (3.03)	-
12	Adjustment of Dues Check Off Deductions (Provide Detail on Page 2):			
13	1st Dues Used as Initiation/Reinstatement (\$15-\$18.76)		\$ (3.76)	-
14	Initiation/Reinstatement Used as Dues (\$18.76-\$15)		\$ 3.76	-
15	Other Fees And Adjustments (provide explanation and detail):			
16				
17				
18				
19				
20	Total Per Capita and Fees Due/Credit (Add Lines 3 through 19)			

Certified By: _____ ST/President, Date: _____

This report must be signed by the Secretary-Treasurer or the President and imprinted with the Local Lodge Seal.

Please attach a check in the amount of any balance due. For (Credit) balances use page two to provide a full explanation of the circumstances that created the (Credit). Only credits with adequate explanations will be approved for reimbursement.

