

**IODE ONTARIO** Rev. 08/11  
**REMITTANCE FORM FOR PRIMARY CHAPTER TREASURERS UNDER PROVINCIAL JURISDICTION**

Please use this form when forwarding fees, donations or payments to: **IODE Ontario, 9-45 Frid St., Hamilton ON L8P 4M3**

Chapter Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Treasurer: \_\_\_\_\_

FEES*	Number	Amount	Total
<b>Provincial Per Capita Fee</b>	@	\$20.00	
<b>National Fee</b> (includes ECHOES subscription)	@	\$30.00	
Additional ECHOES subscription	@	\$5.00	
* <b>National General Liability Insurance</b>	@	\$3.50	
* <b>National Per Member Levy</b>	@	\$5.00	
* <b>Provincial Chapter Fee - \$25 Per Chapter</b>	@	\$25.00	

\* last 3 items- to be taken from chapter funds (administrative expense)

**TOTAL PAYMENT OF FEES:** \_\_\_\_\_

**PROVINCIAL FUNDS DONATIONS:**

Special Representatives	4 3006
Citizenship	4 3004
Peacekeeper Park	4 3016
Communications	4 3005
Lucy Morrison Memorial Fund for Education	4 3007
Northern Ontario Education Fund	4 3009
Services	4 3001
Footwear for Kids	4 3002
Christmas Toys	4 3014
Services Shipping Fund	4 3015
Concern for Children - "It's all about Genes"	4 3003

**TOTAL DONATIONS TO PROVINCIAL FUNDS:** \_\_\_\_\_

**NATIONAL FUNDS DONATIONS:**

Endowment	4 5005
Citizenship	4 5010
Peace Garden	4 5004
Education	4 5009
Labrabook	4 5013
Labrador Bursary	4 5014
Second War Memorial	4 5003
Services	4 5006
Snack Pack	4 5007
Canadian Veterans Overseas	4 5011
Disaster Relief	4 5008
IODE 100th Anniversary Program	4 5001
Bolingbroke Restoration	4 5012
Public Relations	4 5015
Other	

**TOTAL DONATIONS TO NATIONAL FUNDS:** \_\_\_\_\_

**PAYMENT OF INVOICES FOR SUPPLIES:**

Invoice #								
Amount								

**TOTAL PAYMENT OF SUPPLIES & CALENDARS:** \_\_\_\_\_

**TOTAL AMOUNT OF THIS REMITTANCE:** \_\_\_\_\_

All cheques payable to '**IODE Ontario**'

\*\*\*When forwarding payment of fees, attach a completed **MEMBERSHIP LIST** for the mailing of Echoes and Income Tax Receipts. This form must be signed by the Treasurer and President with the total amount of fees paid by each member. **Keep a copy of this remittance for your records.**