

WEEKLY MEMBERSHIP REPORT

DATE:		=					
SPONSOR NAME	SPONSOR NUMBER	MEMBER NAME	MEMBER NUMBER	CHAPTER NUMBER	PAYMENT TYPE	PAYMENT METHOD	AMOUNT RECEIVED
Joe DiMaggio	******	Jon Snow	#########	AL 34	FINAL PAYMENT	PROCESSED ONLINE	\$50.00
							
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						TOTAL:	\$0.00
OFFICE LOCATION:						·	
		SIGNED BY:					
OFFICE PHONE:		7					

NO CASH ACCEPTED - PLEASE SEND CHECK OR MONEY ORDER
NOTE: USE A SEPARATE REPORT AND CHECK/MONEY ORDER FOR AUXILIARY MEMBERS