



Daughters of Penelope Empire State District # 6 Annual District Reconciliation Form

District Per Capita Dues

This is to certify that _____ had _____ paid
Chapter Name & Number Number of Members
 members in good standing for _____. We are remitting \$ _____ which reflects \$4.00 per
Year
 member for District # 6 Per Capita dues.

Signed: _____
President

Signed: _____
Secretary

Scholarship Assessment

Chapters with 0-15 Members.....	\$100.00
Chapters with 16-40 Members.....	\$125.00
Chapters with 41-75 Members.....	\$150.00
Chapters with 76+ Members.....	\$200.00

Please enter amount of Chapter Assessment: \$ _____

Chapter Contribution for the Greek Independence Day Parade Float—NYC

_____ \$50.00 _____ \$75.00 _____ \$100.00 Any Amount \$ _____

Please forward this form with payments to the District Treasurer by April 15th. Make one check payable to:

Daughters of Penelope District 6

Send check and form to District Treasurer Marina Patelos 5 Rapp Rd, Albany, NY 12203. Tel: (518)275-3244

Faint, illegible text at the top of the page, possibly a header or title area.

A single line of faint text, possibly a separator or a specific line of data.