



Reinstatement Member Processing Form

This form should ONLY be used for members whose anniversary date is at least one year prior to today's date. If *less than one year* has passed since the membership has lapsed, please call KFBPW Database Manager at the contact information below and request a renewal notice be sent to the member directly.

Member Information: (please type or write clearly)

Dues Information: State MOL \$25.00, State MAL \$25.00, State SOL \$15.00

Member Type: <i>(please check)</i> <input type="checkbox"/> Member of Local (MOL) <input type="checkbox"/> Student of Local (SOL) <input type="checkbox"/> Member at Large (MAL)	Name:		Member ID #:	State Dues	Paid Date
	Company Name: <i>(if applicable to mailing address)</i>			\$	__/__/__
	Address 1:		State Magazine Delivery Preference		
	Address 2:		() Electronic () Hardcopy		
	City, State, Zip:				
	Work:	Home:	Cell:		
	Fax:	Email:			
Member Type: <i>(please check)</i> <input type="checkbox"/> Member of Local (MOL) <input type="checkbox"/> Student of Local (SOL) <input type="checkbox"/> Member at Large (MAL)	Name:		Member ID #:	State Dues	Paid Date
	Company Name: <i>(if applicable to mailing address)</i>			\$	__/__/__
	Address 1:		State Magazine Delivery Preference		
	Address 2:		() Electronic () Hardcopy		
	City, State, Zip:				
	Work:	Home:	Cell:		
	Fax:	Email:			
Member Type: <i>(please check)</i> <input type="checkbox"/> Member of Local (MOL) <input type="checkbox"/> Student of Local (SOL) <input type="checkbox"/> Member at Large (MAL)	Name:		Member ID #:	State Dues	Paid Date
	Company Name: <i>(if applicable to mailing address)</i>			\$	__/__/__
	Address 1:		State Magazine Delivery Preference		
	Address 2:		() Electronic () Hardcopy		
	City, State, Zip:				
	Work:	Home:	Cell:		
	Fax:	Email:			

Step 1: After indicating "Member Type" for each reinstating member, please complete all information requested. All information will be used to update the KFBPW database and used on mailing labels. Please confirm all information for accuracy. Errors can lead to non-receipt of member mailings.

Step 2: Enter the dues collected from each member for State dues. The current State dues are: Member of Local (MOL) \$25.00, Student of Local (SOL) \$15.00, and Member At Large (MAL) \$25.00. Information about State dues can be obtained by contacting KFBPW's Membership Chair, Database Manager or State Treasurer.

Step 3: Remit all reinstating member dues collected by the 20th of each month. Please use as many forms as you need. Send only the state dues amount collected to KFBPW Treasurer at the address shown. There will no longer be an electronic transfer of Local dues. The local dues should be retained by the local.

PLEASE KEEP A COPY FOR YOUR RECORDS

Remit **STATE DUES** directly to:
 KFBPW Treasurer
 Diane Croney-Turner
 26 Harton Place
 Hopkinsville, KY 42240

Copy to:
 KFBPW Database Manager
 Millie Lotter
 420 Westfield Lane
 Henderson, KY 42420

Questions ??? Contact: Millie Lotter, Database Manager, (mdloller@att.net) or Diane Croney-Turner, Treasurer (diane@pacs-ky.org)

Total Dues this page	\$
Total Dues for ALL pages submitted for Reinstating Members	\$

Local Organization Name: _____

Treasurer's Name: _____

Treasurer's Email Address: _____

Treasurer's Daytime Phone Number: _____ Date: _____