

# \_\_\_\_ ANNUAL PER CAPITA TAX REPORT \_\_\_\_

## Tennessee Federation of Colored Women’s Club’s Inc.

Please complete this form in triplicate. Send one copy with dues (\$10.00 per member) to State Financial Erma J Johnson 28 Shadow Lawn Drive Jackson, Tennessee 38301. Send second copy to State President Shelia Barlow 104 Woodbrair Convington, Tennessee 38109. Keep third copy for your records.

Girls   Adults

Name of Club: \_\_\_\_\_ City: \_\_\_\_\_     \_\_\_\_\_     \_\_\_\_\_

President: \_\_\_\_\_ Address: \_\_\_\_\_

No. of Members: \_\_\_\_\_     Amount Enclosed: \_\_\_\_\_     Date: \_\_\_\_\_

Members	Address	If “New” Member indicate (X)
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Report submitted by: \_\_\_\_\_

Telephone \_\_\_\_\_