

INTERNATIONAL ASSOCIATION OF MINISTERS' WIVES AND MINISTERS' WIDOWS, INCORPORATED

STATE PRESIDENT REPORT

1 NAME OF STATE ORGANIZATION: _____
 CONVENTION CITY: _____ STATE _____ DATE _____ 20__

2 **Please Submit by April 30**
Send all copies to Financial Secretary
 List Local Chapter ONLY in your state or nation: *(funds are reflected on local report blank)*

	AMT PAID PRIOR THIS REPORT	AMT PAID W/ THIS REPORT	TOTAL FOR YEAR
State Organization Fees \$100.00 per annum			
Founder's Day			
Headquarters			
International Conference Support			
Commission on Student Affairs (scholarship)			
• Ada M. Palmer Scholarship Fund			
• E.C. Bouey Scholarship Fund			
• Gladden-Johnson Scholarship Fund			
• VA University of Lynchburg			
• Rendella L. Gayton Scholarship Fund			
Ways & Means			
Public Relation & Publications			
Archives			
Contingency Fund (Minimum \$50.00)			
Pictorial Plaque - \$100 per person (Plaque in Headquarters).			
TOTAL			

4 Name of State President: _____ Phone: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Name of State Secretary: _____ Phone: _____
 Address: _____ City: _____ State: _____ Zip: _____

5 **MAKE CHECKS PAYABLE TO:**
 INT'L ASSOC MIN. WIVES AND MIN. WIDOWS, INC.
SEND ALL COPIES OF THE FORM AND PAYMENT TO:
Joan Hicks - 2787 S.W. Plass Avenue, Topeka, KS 66611
 Copies: **White:** Financial Secretary • **Canary:** International President
Pink: State President

INT'L AMWMW OFFICE USE ONLY

Date Received _____
 Total \$ _____
 Check - Personal () Assoc. ()
 Receipt no. _____

On Site Registration Cash or Money Order Only-NO CHECKS