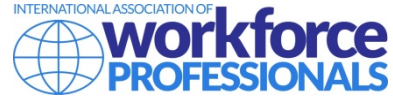


IAWP TRANSMITTAL COVER SHEET



Send original cover sheet with payment and original of each Membership Transmittal and Dues form to IAWP
Administrative office, 3267 Bee Caves Road, Suite 107-104, Austin, Texas 78746.

Keep copy for chapter records.
Make checks payable to IAWP.

-
1. Chapter Name: _____
 2. Transmittal Dates: _____
 3. Transmittal Numbers: _____
 4. No. of full members: _____ @ \$50 each = \$ _____
 5. No. of full members in retired Status: _____ @ \$25 each = \$ _____
 6. No. of introductory members: _____ @ \$25 each = \$ _____
 7. No. of International life members: _____
 8. Total members listed: _____ Total dues = \$ _____
(Total items 4-7)
Total new members _____
 9. Total members as of last transmittal: _____
 10. Total members to date: _____
(Total Items 8 & 9)
 11. Name/ Address to whom receipt should be mailed:
Name: _____
Address: _____

Phone: _____
 12. Name / Address of transmittal preparer:
Name: _____
Address: _____

E-mail: _____
Phone: _____

Do not write in this block