

CHAPTER NAME _____ CHAPTER NUMBER _____ DATE RECEIVED by COL _____ / _____ / 2017

Print NAME of PERSON SUBMITTING THIS SUBTOTAL Sheet:

NOTE DEADLINE: To be credited to current year R4S and eligible for awards or incentives, **all proceeds must be postmarked by AUGUST 14th**. Funds received after AUG 14th deadline will be credited to next year's R4S.

FOR OFFICE USE ONLY

VERIFIED _____

ENTERED _____

SUMMARY _____

INCENTIVES _____

DAYTIME PHONE (_____) _____ EMAIL _____

SHIP TO ADDRESS _____

CITY _____ STATE/PROVINCE _____ ZIP _____

(DO NOT SEND IN SPONSOR RECEIPT FORMS. PRINT ONLY ONE NAME AND ONE DOLLAR TOTAL PER LINE. Be certain \$ dollar amount column total equals \$ amount enclosed.)

Participants Name	COL #	Address	City	State	Zip	\$ Amount Enclosed	T-Shirt Size*	Comments

Office Use Only
TOTAL from SUB Sheets

CHAPTER TOTAL

COLUMN TOTAL \$

MAIL Form & Checks to:
COL PO Box 748
Crowley TX 76036

*Only list enclosed funds, not any future or previous donations and NO CASH
** Only those meeting the \$500 goal will qualify for a t-shirt which will be mailed to the address on the form. SIZES are S, M, L, XL, 2X, 3X, 4X, 5X