

Southwest Suburban Federation of Teachers, AFT Local 943

DUES REPORT AND PAYMENT

September, 2009 – June, 2010

Council Name: _____

MEMBERS		RATE	AMOUNT OWED	MONTH(S)	
	Paid Last Month	Paid This Month		<input type="checkbox"/>	
Full			\$54.83		<input type="checkbox"/> September
Half			\$30.66		<input type="checkbox"/> October
Quarter			\$17.88		<input type="checkbox"/> November
					<input type="checkbox"/> December
					<input type="checkbox"/> January '10
					<input type="checkbox"/> February
					<input type="checkbox"/> March
					<input type="checkbox"/> April
					<input type="checkbox"/> May
					<input type="checkbox"/> June

Fair Share Fee Payers		RATE	AMOUNT OWED
	Paid Last Month	Paid This Month	
Full			\$54.83
Half			\$30.66
Quarter			\$17.88

TOTAL AMOUNT OWED:

Make checks payable to:

SOUTHWEST SUBURBAN FEDERATION OF TEACHERS, AFT LOCAL 943

Mail checks to: Sue Mirabella (put council name on check)
 AFT Local 943
 15521 South 70th Court
 Orland Park, IL 60462 (708) 633.0943



Council Treasurer: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

check here if change to treasurer info

Please check:

No changes this month to membership

Additions, deletions, name and/or address changes of council members indicated on reverse.

Please delete the following names: (resignation, RIF, retirement, etc.)	Reason for Deletion

Please change the name and/or address for the following:

Please ADD the following new members: Indicate Dues Category (full, half, quarter or fair share dues) and Job Title (teacher, custodian, nurse, secretary, librarian, bus driver, teacher aide, etc.)			
Name:			
Address:			
Phone#:	Dues Category:	Job Title:	Work Site:
Name:			
Address:			
Phone#:	Dues Category:	Job Title:	Work Site:
Name:			
Address:			
Phone#:	Dues Category:	Job Title:	Work Site:
Name:			
Address:			
Phone#:	Dues Category:	Job Title:	Work Site: