

October 1, 2018

**TO BRANCH FINANCIAL SECRETARIES**

Enclosed please find your Quarterly Branch Report indicating the amounts now due to the Central Council Office. **Payment is due upon receipt.** Thank you for your attention to this matter.

**Please remember:**

1. Quarterly Branch (Per Capita Bill) Report must be signed by ONLY the Financial Secretary and/or Treasurer. Trustees should perform quarterly audits of all Branch finances.
2. A copy of the report to be submitted with the required checks to the I.C.F. Office as soon as possible.
3. Send any Hospitalization Benefit payments to the I.C.F. Office.
4. Copies of the Treasurer's Reports must be sent to the I.C.F. Office.
5. The Branch Liability Insurance Premium which was sent to you on 9/24/18 is due December 31<sup>st</sup>. Please submit your payment.

Your packet contains the following items:

1. ***Per Capita Bill (due upon receipt)***  
***\*\* (Past Due Per Capita of 6/30/18 and supply order invoices if applicable.)***
2. ***Dues Payment Record***
3. ***Delinquency Report (if applicable)***
4. ***Branch Membership Roster*** - Please review your roster quarterly to make sure the addresses and area codes/telephone numbers of your members are correct. Please send in any corrections.
5. ***Dues Payment Report for the Fourth Quarter***
6. ***Branch Dues Schedule Form for 2019 and Explanation Sheet for the Breakdown of the Dues.***
7. ***Branch Dues Increase and Reporting Explanation Letter***
8. ***Delinquent Members and the Bollettino Explanation Letter***
9. ***Monetary Donation Reminder.***

**\*\*\*During this 4<sup>th</sup> quarter, please look at the hospital paid thru date for your members in the plan. If you know a member no longer wants to remain in the plan and did not pay for 2018 or a member is showing a date from a past year – please mark “cancel plan” on the 4<sup>th</sup> quarter dues payment form next to the hospital portion. This way, we have official notification from the Branch and we can update our records concerning members in the hospital plan.**

***We have included 3 copies of the Treasurer's Report for your use. Please use the Branch Order Form for additional forms.***

