

IB 364al  
7/07  
(ES)

DELTA OMICRON  
INTERNATIONAL MUSIC FRATERNITY

Chapter Payment Form

Use this form for all chapter payments. Make checks to Delta Omicron Fraternity. All payments should be sent directly to the Executive Office: Julie H. Wright, Executive Secretary, 910 Church Street, PO Box 752, Jefferson City, TN 37760. Make 2 copies of this form. Send one to the Executive Secretary. Retain one copy in the chapter treasurer's files.

CHAPTER \_\_\_\_\_

NAME & CONTACT INFORMATION FOR REPORTING OFFICER:

NAME & OFFICE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

*Payments: Please indicate the amount of payment for the specific fee or purchase.*

**National Fees:**

Annual National Dues (\$30 per member) (Attach IB form 368)	_____	Due: October 31
Optional Life Membership Dues (\$300) (Attach IB form 314)	_____	
Service Fee (\$25.00)	_____	Due: October 31
Founders Day Pennies (\$.98 per member)	_____	Due: April 1
Endowment Investment (\$1 per member)	_____	Due: April 1
Conference Investment (\$200 per chapter)	_____	Due: April 1

**Other:**

Star of Delta Omicron (\$10.00 each) (Attach IB Form 378)	_____	March or April
Other: Attach IB 308 for supplies orders	_____	(list total from IB 308 here)
Attach IB 336 for jewelry orders	_____	(list total from IB 336 here)
TOTAL Amount Enclosed	_____	