

MISGA
ELECTRONIC SUBMISSION COVER SHEET
Appendix 2.1.1C

DATE		CLUB		CLUB NO.	
Phone No.			E-mail Address		

TO: _____
Division Associates Chairman

FROM: _____
Club Representative

Attached are _____ **Membership Change Forms W-5-89** for updating of our club's MISGA Associates Roster. The table below provides a summary of the modifications.

Current Roster Level	Adds	Deletes	Changes	Balance	Payment Due	Check No.

Our club's *associates dues* payment check has been forwarded to you via the USPS. If you have not received the check within a reasonable amount of time, please contact me.

If you have questions, need additional information, or wish to discuss any of these items, please e-mail me or telephone me.