2025 FCE DUES & CONTRIBUTION INSTRUCTIONS

INSTRUCTIONS FOR FCE UNIT TREASURERS/INDEPENDENT MEMBERS

* **ALL MEMBERS**: shall
  + - Complete 2025 Membership Form in all sections, include a **signature**. If a member doesn’t have email, request assistance from a relative, friend or unit member/officer.
    - Provide payment. (Senior membership fee applies to anyone that will be eighty (80) by 12/31/2024. The birth date must be included on the membership form.)

## FCE UNIT Treasurer

* + From each unit member, collect payment for Dues (National, State, County Council and Club/Unit) and Contributions/Donations.
  + Check each membership form for accuracy, (including the “Please Indicate” section), legibility, and signature.
  + For Unit’s records, *retain a copy of each* 2025 Membership Form and FCE Dues & Contribution Form.
  + Submit one check payment, all original signed Membership Forms, and the FCE Dues and Contribution Form to the **County** **Treasurer by October 1, 2024.**
  + A late fee of $1.50 per member will be assessed if postmarked after November 15.
  + **NOTE**: If there is only ONE FCE Unit in the county, Unit Treasurer will follow County Treasurer’s Instructions, and collect forms from Independent Members within the county.
* **Independent Member**:
  + - Complete Membership Dues form and FCE Dues and Contribution Form.
    - Provide total payment of dues (National, State, and County Council) and donations/contributions. For your own records, retain a copy of both the 2025 Membership Form and FCE Dues and Contribution Form.
* Submit money, original signed Membership Form, the FCE Dues and Contribution Form to the **County** **Treasurer by October 1, 2024.**
  + **NOTE**: If there is only ONE FCE Unit in the county, Independent Member will submit to the Unit Treasurer by October 1, 2024.
* **NOTE**: If there are no FCE Units or County Councils in the county, Independent Member will submit to Kansas FCE State Treasurer by November 1, 2024 or deliver at the 2024 State Conference in Chanute, KS. A late fee of $1.50 per member will be assessed if postmarked after November 15.

--------- (Top half for FCE Unit Treasurer/Independent Members) **--**- (Bottom half for County FCE Council Treasurer)--- ----

## INSTRUCTIONS FOR COUNTY FCE COUNCIL TREASURER

* Distribute to each FCE Unit and Independent Member the following:
  + Instructions for Unit Treasurers and Independent Member.
  + 2025 Membership Form (one for each unit member and/or Independent Member).
  + FCE Dues and Contribution Report Form (one for each unit and one for each Independent Member).
  + Ask the FCE treasurers to check 2025 Membership Form for accuracy, (including the “Please Indicate” section and emails), legibility, and signature.
* Receive money, 2025 Membership Forms, and the FCE Dues and Contribution Report Form from each FCE Unit Treasurer and Independent Member by **October 1, 2024**. Please check membership forms against the list of members to make sure you have a membership form for each person listed.
* Complete the FCE DUES AND CONTRIBUTION REPORT FORM *for the county* and retain a copy of for own records.
* Send the County FCE Dues and Contribution Report Form, all original signed 2025 Membership Forms and one check made payable to KAFCE for the total amount of Dues and Contributions to the Kansas FCE State Treasurer by November 1, 2024 or deliver at the 2024 State Conference in Chanute, KS.
* A late fee of $1.50 per member will be assessed if postmarked after November 15.

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**2025 FCE DUES AND CONTRIBUTION REPORT FORM**

**(Circle One) FCE UNIT / COUNTY FCE COUNCIL / INDEPENDENT MEMBER**

*New member dues and contributions received during the year are due upon receiving them (with no late fee)*

**PLEASE PRINT ALL INFORMATION LEGIBLY IN BLACK INK**

Date \_\_\_\_\_\_\_\_\_\_\_ Area \_\_\_\_\_\_\_\_ County\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FCE Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number FCE Units \_\_\_\_\_\_\_\_ Number Unit Members\_\_\_\_\_\_\_ Number Independent Members\_\_\_\_\_\_\_

Name Treasurer/Independent Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DUES # of Members:**

$\_\_\_\_\_\_\_\_\_County Dues x #\_\_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**$45.00** Kansas & National individual members x #\_\_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**$41.50** Senior members (80 yrs. by 12/31/24) x #\_\_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**$65.00** KS & National Family memberships x #\_\_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

$ 5.00 Youth membership (18 yrs. & under) x #\_\_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

$ 1.50 Late Fee (per member) after November 15 x #\_\_\_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL FCE DUES** **$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CONTRIBUTIONS**

KAFCE

Kansas FCE Scholarship Fund $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Joann Newby Adult Education Grant $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clovia 4-H House, KSU $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Smurthwaite House, KSU $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAFCE

Dimes for National $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dollars for Leadership (Leadership Training) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Honor Fund $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

International Peace Garden $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legacy Fund $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AFFILIATE ORGANIZATIONS

Rural Women in Action Funds, $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Contributions $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Amount Enclosed of Dues *Plus* Contributions** (one check) $**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Due By: (**A late fee of $1.50 per member will be assessed if postmarked after November 15.)

**Oct. 1, 2024 –** FCE Unit & Independent Members *with* County Council –Send to County Council Treasurer.

**Nov. 1, 2024 –** County FCE Council Treasurer send to State Treasurer-

**Nov. 1, 2024 –** FCE Unit & Independent Members *without* County Council, Send to State Treasurer-

**DeLores Walden**

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**2025 Membership Form**

\*\*\*TYPE OR PRINT CLEARLY IN BLACK INK\*\*\*

\*\*\*Do Not Abbreviate Street Names, City, County, or State\*\*\*

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Member ID# KS - \_\_ \_\_ \_\_ \_\_ - \_\_

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_ Zip Code +4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone/Cell# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Club/Unit’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Club/Unit’s County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Membership (Please list): Spouse Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dependent Child (ren)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Dues** | **Individual**  **Member** | **Family**  **Membership** | **Senior**  **Member**  **(80+ years)** | **Youth**  **Member**  **(Under 18)** | **Kansas Information**  **Area** (Circle One): |
| National | $35.00 | $45.00 | $31.50 | $5.00 | NE NW SC SE SW |
| State | $10.00 | $20.00 | $10.00 | 0 | Birth Date (MM/DD/YYYY) |
| Council/County |  |  |  |  | Date joined |
| Club/Unit |  |  |  |  | Date dropped |
| Donation to **KAFCE** \* |  |  |  |  | Date re-joined |
| Donation to **NAFCE\*** |  |  |  |  | **Years of Membership in 2025** |
| Donation to **ACWW\*** |  |  |  |  |  |
| Total Amount Enclosed |  |  |  |  |  |

\*Refer to the Dues and Contribution Report Form list of choices that you may choose to support

Sign and send with total membership dues to Club/Unit Treasurer by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Member Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Must be an original signature, copies will not be accepted

**PLEASE INDICATE: (Check all that Apply)**

\_\_\_\_ **Independent Member** (Does not belong to a FCE Unit) County of Residence

\_\_\_\_ New Member (Never belonged to FCE before) \_\_\_\_ Change of address, etc.

\_\_\_\_ Re-joined Member (Have not belonged for a time) \_\_\_\_ Club President - 2025

\_\_\_\_ County Council President - 2025

*Mission…To strengthen individuals, families, and communities*

*through continuing education, developing leadership, and community action.*