

IDAHO AREA 13 GROUP CONTRIBUTION FORM

Date: _____ District Number: _____

Group Name: _____ Group #: _____

Mailing Address: _____

Group Rep: _____ Treasurer: _____

GR Email: _____ Treas Email: _____

GR Phone Number: _____ Treas Phone Number: _____

Contribution: Month _____ Quarter _____ Amount \$ _____

**MAKE CHECKS PAYABLE TO: IDAHO AREA AFG
MAIL TO:
IDAHO AREA AFG TREASURER
P O BOX 153
COEUR D'ALENE, IDAHO 83816**

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