

# OFRW Club Membership Directory

## LIST MEMBERS ALPHABETICALLY BY LAST NAME

Total due per member is \$15 (\$5 for OFRW and \$10 for NFRW). Make all checks payable to **Ohio Federation of Republican Women** .  
 There is a once a year \$15 club service fee due to NFRW before March 1 amounts may be submitted by check or via Pay Pal.

You may also submit your membership roster via website at <http://www.theofrw.org>

Questions? Call OFRW office at (614) 456-2054

Mail to: Kimberly Bartlett 1309 W 108th St., Suite 3, Cleveland, Ohio 44102

<b>Club Name</b>	<input type="text"/>	<b>County</b>	<input type="text"/>		
<b>Club #</b>	<input type="text"/>	<b>Report #:</b>	<input type="text"/>	Date:	<input type="text"/>
<b>Last Name</b>	<input type="text"/>	Email Address	<input type="text"/>		
First Name	<input type="text"/>	Telephone	<input type="text"/>		
Address	<input type="text"/>	City	<input type="text"/>	Zip	<input type="text"/>
<b>Last Name</b>	<input type="text"/>	Email Address	<input type="text"/>		
First Name	<input type="text"/>	Telephone	<input type="text"/>		
Address	<input type="text"/>	City	<input type="text"/>	Zip	<input type="text"/>
<b>Last Name</b>	<input type="text"/>	Email Address	<input type="text"/>		
First Name	<input type="text"/>	Telephone	<input type="text"/>		
Address	<input type="text"/>	City	<input type="text"/>	Zip	<input type="text"/>
<b>Last Name</b>	<input type="text"/>	Email Address	<input type="text"/>		
First Name	<input type="text"/>	Telephone	<input type="text"/>		
Address	<input type="text"/>	City	<input type="text"/>	Zip	<input type="text"/>
<b>Last Name</b>	<input type="text"/>	Email Address	<input type="text"/>		
First Name	<input type="text"/>	Telephone	<input type="text"/>		
Address	<input type="text"/>	City	<input type="text"/>	Zip	<input type="text"/>

Club Name: \_\_\_\_\_

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<b>Last Name</b>		Email Address		
First Name		Telephone		
Address		City	Zip	
<b>Last Name</b>		Email Address		
First Name		Telephone		
Address		City	Zip	
<b>Last Name</b>		Email Address		
First Name		Telephone		
Address		City	Zip	
<b>Last Name</b>		Email Address		
First Name		Telephone		
Address		City	Zip	
<b>Last Name</b>		Email Address		
First Name		Telephone		
Address		City	Zip	

**Print out as many forms as necessary to list all of your members, change report number for each submittal:**

Has your club approved the establishment of a web presence?  Yes  No

**Make checks payable to: OFRW**

If Yes, list URL:

**OFRW Fax: (614) 358-0581**