

Ohio State Chapter P.E.O. Sisterhood 2022-2023 CHAPTER GIFT TRANSMITTAL FORM

Chapter _____ Chapter Location _____ Date _____

Chapter President:

Chapter Treasurer:

Name: _____
 Address: _____

 Email Address: _____
 Phone: _____

Name: _____
 Address: _____

 Email Address: _____
 Phone: _____

AMOUNT	PROJECT/FUND
	Cotley College – Undesignated
	Cotley College – Designated (specify designation) _____
	Cotley Care & Travel Fund
	P.E.O. Educational Loan Fund – (\$500 minimum lump sum donation qualifies chapter to be an ELF Legacy Chapter)
	P.E.O. International Peace Scholarship Fund – (\$500 minimum with completion of the PIP form qualifies for Partners In Peace)
	P.E.O. Program for Continuing Education – (\$500 lump sum donation qualifies chapter to be a PCE Brighter Tomorrow Chapter)
	P.E.O. Program for Continuing Education Anniversary Gift (\$50.00)
	P.E.O. Scholar Awards – (\$500 lump sum donation qualifies chapter to be a Laureate Chapter)
	P.E.O. STAR Scholarship - (\$500 lump sum donation qualifies chapter to be a STAR Constellation Chapter)
	P.E.O. Foundation – Undesignated
	P.E.O. Foundation – Designated (specify name of fund) _____
	P.E.O. Foundation - Ohio Scholarships Fund 2
	TOTAL DONATION
	All gift transmittal forms, including those for IPS Partners In Peace and the supplemental spreadsheet for additional names, can be accessed on the Ohio website>Chapter Resources>Forms/References under the Treasurer's Section.

Please use supplemental spreadsheet for additional names. The name of a deceased Ohio P.E.O. is inscribed in the **Ohio Book of Remembrance** when gifts totaling \$50.00 or more are received in her memory.

This donation is made (select one): In Honor of In Memory of

Name: _____ Chapter/State: _____ Project: _____ Amount: _____

Please Notify: _____

This donation is made (select one): In Honor of In Memory of

Name: _____ Chapter/State: _____ Project: _____ Amount: _____

Please Notify: _____

Check and Mailing Information:

1. Mail this form and chapter check to Beth Cox, Executive Assistant to the Treasurer, 7600 Tyler's Valley Dr., West Chester, OH 45069
2. Make check payable to: **Ohio State Chapter, P.E.O. Sisterhood.** (Note: send only one check for the total amount.)
3. Gifts must be received by **January 31** to be included in current year convention chapter gift list.

State Use Only: Receipt # _____ Date _____ Check # _____ BR _____ NC _____