

**COUNCIL OF HISTORICALLY  
BLACK GRADUATE SCHOOLS  
(CHBGS)**

Institutional Membership Invoice

**2016-2017**

BILL TO

INVOICE DATE	TERMS	CHBGS FIN	CHBGS WEBSITE
September 6, 2016	Due on Receipt	20-1597249	www.chbgs.org

NAME OF ORGANIZATION:		
NAME OF ORGANIZATION'S REPRESENTATIVE:		
ADDRESS:		
CITY:	STATE:	ZIP CODE:
TELEPHONE NUMBER:	FAX NUMBER:	
E-MAIL:		
<b>DESCRIPTION: COUNCIL OF HISTORICALLY BLACK GRADUATE SCHOOLS (CHBGS) INSTITUTIONAL MEMBERSHIP DUES.</b>		

PLEASE MAKE CHECK PAYABLE TO: COUNCIL OF HISTORICALLY BLACK GRADUATE SCHOOLS.  
FEDERAL ID NUMBER: 20-1597249.

**THE CREDIT CARD PAYMENT OPTION IS AVAILABLE; PLEASE CONTACT DR. MARK GARRISON, TREASURER, DIRECTLY TO COMPLETE THIS PROCESS.**

I CERTIFY THAT I AM DULY AUTHORIZED TO MAKE THIS TRANSACTION FOR AND ON BEHALF OF THE COUNCIL OF HISTORICALLY BLACK GRADUATE SCHOOLS.

PLEASE RETURN THE PORTION BELOW WITH YOUR PAYMENT.

Amount	\$300.00
<b>BALANCE DUE</b>	<b>\$300.00</b>

REMITTANCE

NAME OF ORGANIZATION:	
CHECK #:	
DATE:	
AMOUNT ENCLOSED:	



Dr. Mark Garrison, Treasurer  
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