SUN CITY SHADOW HILLS
COMMUNITY ASSOCIATION CHARTERED CLUB

QUARTERLY MEMBERSHIP FILE REVIEW

The names listed below represent paid club members that have been verified as residents of Sun City Shadow Hills for the _____quarter of _____ for the _____ Club.

(1st, 2nd, 3rd or 4th) (Year) (Club Name)

#	NAME	ADDRESS	DATE PAID	DATE VERIFIED AS RESIDENT

FORM CA-9