



**Blue Star Mothers of America, Inc
Logo Usage Form
Return form and check to:
Carrie Beck, NFS
P.O. Box 880891
Port St. Lucie, FL 39488**

Once you have permission from the National President, this form is to be utilized when you have a project that involves selling products with the National Logo.

Date _____
 Chapter State/Number _____
 Contact Person _____
 Contact Phone _____
 Contact Email _____
 Contact Address _____

Description of project/product being sold

- Details of this continuation (including date of conclusion)

Please check the appropriate statement:

This project is now complete
 We would like to continue with this project

Financial Reporting:

Number sold: _____ @ \$ _____ each = \$ _____
 Less: cost to chapter _____ @ \$ _____ each = \$ _____
 Less: mailing costs (if applicable) \$ _____
 Total Net Earnings: (subtract line 2&3 from line 1) \$ _____

Logo reimbursement to BSMA: (25% of net earnings):

Net earnings \$ _____ X 0.25 = _____

Please remit this form and a check in the above amount made payable to BSMA no later than August 15 of the current fiscal year. While the project may continue, this form needs to be submitted, along with payment for Logo Usage reimbursement by the end of each fiscal year.

Signature of person completing this form
