



**Linda Quattlebaum**  
**State Rating Secretary**  
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**FEE REMITTANCE**

Show Sponsor \_\_\_\_\_ Region \_\_\_\_\_  
 Show Secretary \_\_\_\_\_ Show Date \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 Email \_\_\_\_\_

State Rating Fee charged per combination \$ \_\_\_\_\_  
 Number of combinations\* x \_\_\_\_\_  
 Amount collected \$ \_\_\_\_\_

\*The State Gymkhana Fee is not charged to combinations in a non competitive division (Time Only) or Lead Line Division. Timesheets from those divisions should not be submitted.

When the Time Sheets are transmitted include this form

Do NOT reduce the Time Sheets from legal size paper.

Mail a check or money order for the fees. Do NOT mail cash.

**Make the check or money order payable to: CSHA Gymkhana**

Attach the check or money order to a copy of this completed form.

Submit all State Gymkhana Fees to the above address.

Fees must be submitted no later than 30 days after the show date.

Fees **postmarked** after 30 days are subject to a penalty of double the original amount collected.

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This section to be completed by the State Rating Secretary

Date Time Sheet Received \_\_\_\_\_

Date payment postmarked \_\_\_\_\_ Check or money order # \_\_\_\_\_

Amount Received \$ \_\_\_\_\_ Date Deposited \_\_\_\_\_