

**ARKANSAS CITY CLERKS RECORDERS AND
TREASURERS ASSOCIATION**

I N V O I C E

Arkansas City Clerks Recorders and Treasurers Association

c/o City of Fort Smith / Sherri Gard, CMC
P. O. Box 1908
Fort Smith, AR 72902

ANNUAL DUES (per person)

\$50.00ELECTED OR APPOINTED CITY CLERK, RECORDER, TREASURER

\$15.00..... DEPUTY MEMBERSHIP

\$10.00..... ASSOCIATE MEMBERSHIP

MEMBERSHIP PERIOD: JULY 2007 TO JUNE 2008

MUST BE PAID NO LATER THAN AUGUST 31, 2007

CITY CLERK, RECORDER, TREASURER MEMBERSHIP ~ \$50.00

(Please type or print)

Name: _____ Title: _____ Check if new member

Mailing Address: _____

Street Address: _____
(If different from mailing address)

City: _____, Zip Code: _____

DEPUTY MEMBERSHIP ~ \$15.00

Deputy membership application ***must*** include letter from the City Clerk, Recorder, or Treasurer stating the person has been appointed as his / her deputy. Please attach letter to invoice.

Name: _____ Check if new member
(Please type or print)

ASSOCIATE MEMBERSHIP ~ \$10.00

Name: _____ Check if new member
(Please type or print)

OTHER INFORMATION:

Telephone Number: _____ Facsimile Number: _____

Email Address: _____

- Member's name on receiving notice has changed
- Member has been replaced, please send membership material and information

Please return this invoice with payment for proper credit and retain a copy for your records.

Make checks payable to A.C.C.R.T.A.