

**Arkansas City Clerks, Recorders and Treasurers Association**

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**INVOICE**

**Remit to: Arkansas City Clerks Recorders and Treasurers Association (ACCRTA)**  
**c/o Becky Walker, Recorder/Treasurer**  
**City of Mansfield**  
**P.O. Box 307**  
**Mansfield, AR 72944**

**MEMBERSHIP PERIOD: JULY 2018 to JUNE 2019**  
**ANNUAL MEMBERSHIP DUES (per person)**

**Please pay by August 31, 2018**

**\$50.00** ELECTED OR APPOINTED CITY CLERK, RECORDER, TREASURER  
**\$15.00** DEPUTY MEMBERSHIP  
**\$10.00** ASSOCIATE MEMBERSHIP

**CITY CLERK, RECORDER, TREASURER MEMBERSHIP ~ \$50.00**

City of: \_\_\_\_\_  Check if new member

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Street Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(If different from mailing address)

E-mail address: \_\_\_\_\_

**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

Phone : \_\_\_\_\_ E-mail address: \_\_\_\_\_

**ASSOCIATE MEMBERSHIP ~ \$10.00**

Name: \_\_\_\_\_  Check if new member

Phone : \_\_\_\_\_ E-mail 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.**