

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

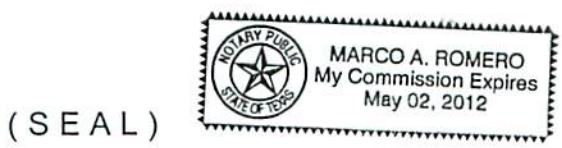
I, Juan Martinez, do hereby state that my membership in the National Fire Protection Association on behalf of Hidalgo County and dues to be paid by Hidalgo County is necessary in the performance of my duties as an official employee of Hidalgo County. I further state to the best of my knowledge and belief the following:

1. My participation in the association or organization is for the betterment of County Government and the benefit of me as a County official or employee;
2. The association or organization is not affiliated with a labor organization;
3. Neither the association or organization nor an employee of the association or organization directly or indirectly influences or attempts to influence the outcome of any legislation pending before the legislature.
4. The association or organization may provide information for a member of the legislature to appear before a legislative committee at the request of the committee or member of the legislature to provide information related to County Government, but not to attempt to influence legislation; and
5. Neither the association nor organization directly or indirectly contributes any money, services, or other valuable thing to a political campaign or endorses a candidate or group of candidates for public office.

SIGNATURE: [Handwritten Signature]
TITLE: _____

DATE: 8/26/09

Before me Marco A. Romero, a Notary Public, appeared JUAN MARTINEZ, and on his/her oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



[Handwritten Signature]
NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT:	LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES:	LGC § 89.002



MEMBERSHIP NOTICE

Billing Center, P.O. Box 9689, Manchester NH 03108-9689

DATE: 08/04/09	AMOUNT DUE: <input checked="" type="checkbox"/> 1 year - \$150
RENEWAL THRU 08/31/10	Or check one: <input type="checkbox"/> 2 years - \$270
I.D. NUMBER: 2644379	<input type="checkbox"/> 3 years - \$390

Notice: 4608604X #3

REMIT RENEWAL DUES WITH NOTICE AS SOON AS POSSIBLE.

BILL TO:



HIDALGO CNTY FIRE MARSHAL
HIDALGO CNTY FIRE MARSHAL
2814 S US HIGHWAY 281
EDINBURG, TX 78539-6243

SELECT ONE:

- Check enclosed payable to NFPA (US funds from US Bank)
- Charge to my: MasterCard® VISA®
 American Express® Discover®

Card No. _____ - _____ - _____ - _____

Expire Date ____/____/____

IMPORTANT!

e-mail:

juan.martinez@co.hidalgo.tx.us

- I have updated my information on the back of this notice.

Thank you for your loyalty to NFPA. Please update your records and return this notice with your dues.

Membership includes a \$45.00 NFPA Journal® subscription.

31 0002644379 460860424 4 00000015000

DETACH HERE AND RETURN NOTICE IN THE ENVELOPE PROVIDED.



MEMO

FROM: Carol Ann Faber, Director of Membership
TO: Hidalgo Cnty Fire Marshal
RE: ID# 2644379

A renewal notice regarding your NFPA membership was sent several months ago. And our records show we haven't yet received your dues.

Please return payment with the attached notice as soon as possible. Otherwise, your NFPA membership ends on 08/31/09.

Please act today. So you will continue to receive your NFPA benefits, including your subscription to *NFPA Journal*®, members-only discounts on seminars and publications and timely information on code changes.

But more importantly, you must renew now to keep your NFPA voting rights. If dues are not paid by the date shown above, you will be subject to a 180-day waiting period to vote on important NFPA codes.

Thank you for your quick response. If you have already sent payment, your records will be updated accordingly.

P.S. Please verify and update membership information on your notice. Then return it with your NFPA dues immediately. Thank you.

Records show this is your NFPA shipping address: (Make necessary changes on back of form.)

ID# 2644379
HIDALGO CNTY FIRE MARSHAL
HIDALGO CNTY FIRE MARSHAL
2814 S BUS HWY 281
EDINBURG
TX 78539

This NFPA membership belongs to the individual named on the invoice.

To change the name on the membership, please provide the new information at right.

The original membership will be cancelled and the pro-rated amount will be applied to a new membership.

The join date will be updated, a new I.D. number issued and a new 180-day waiting period for voting will apply.

Change my BILLING Information:

Name _____
ID Number _____
Organization _____
Address _____
City _____ State _____ ZIP _____
Phone _____ E-mail Address _____

Change my SHIPPING Information:

Name _____
ID Number _____
Organization _____
Address _____
City _____ State _____ ZIP _____
Phone _____ E-mail _____