

TO THE COUNTY AUDITOR
AFFIDAVIT FOR MEMBERSHIP DUES

THE STATE OF TEXAS

COUNTY OF HIDALGO

I, GUADALUPE TREVINO, do hereby state that my membership in the
NATIONAL SHERIFF'S ASSOCIATION on behalf of Hidalgo
County is necessary in the performance of my duties as an official/employee of Hidalgo County.

I further state 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, except for the providing of information for a member of the legislative committee at the request of the committee or member of the legislature; and
- 4.) Neither the association or 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.

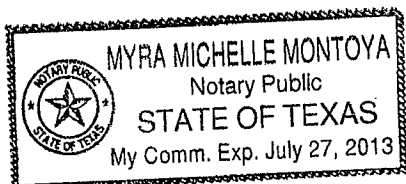
SIGNATURE: _____

Guadalupe Trevino

TITLE: _____

SHERIFF

Before me Myra M. Montoya, a Notary Public, appeared, GUADALUPE TREVINO and on his/hers oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



Myra M. Montoya
NOTARY PUBLIC IN AND FOR THE
STATE OF TEXAS

AUTHORITY: LGC Sec. 113.064b

COUNTY AUDITOR'S FORM: SFA-CA-041



National Sheriffs' Association
1450 Duke Street
Alexandria, VA 22314
Phone 703-836-7827 Fax 703-683-6541

INVOICE

DATE:
March 22, 2011

ID # 226707

Bill To:
Sheriff Guadalupe Trevino, Jr.
Hidalgo County
711 E Cibolo Rd
Edinburg, TX 78542

Ship To:

DESCRIPTION	AMOUNT
NSA Membership Dues	\$ 500.00
TOTAL	\$ 500.00

Make all checks payable to **National Sheriffs' Association** or provide credit card information below:

Circle one: Visa MasterCard AMEX Discover

Credit Card # _____ Expiration Date ____ / ____

Security Code _____ (3-digit number found on the back signature panel of the Visa, MasterCard, Discover or 4-digit number found on the front of the AMEX)

Print Cardholder's Name _____ Signature _____

TO THE COUNTY AUDITOR
AFFIDAVIT FOR MEMBERSHIP DUES

THE STATE OF TEXAS
COUNTY OF HIDALGO

I, RAFAEL GARZA, do hereby state that my membership in the
NATIONAL SHERIFF'S ASSOCIATION on behalf of Hidalgo
County is necessary in the performance of my duties as an official/employee of Hidalgo County.
I further state 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 of 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, except for the providing of information for a member of the legislative committee at the request of the committee or member of the legislature; and
- 4.) Neither the association or 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.

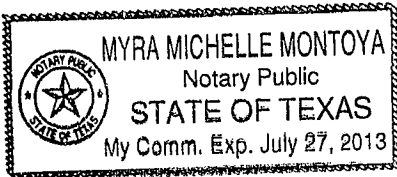
SIGNATURE: _____

Rafael Garza

TITLE: _____

SERGEANT

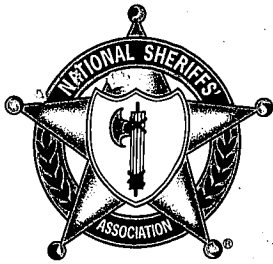
Before me Myra m. Montoya, a Notary Public, appeared, RAFAEL GARZA and on his/hers oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



Myra m. Montoya
NOTARY PUBLIC IN AND FOR THE
STATE OF TEXAS

AUTHORITY: LGC Sec. 113.064b

COUNTY AUDITOR'S FORM: SFA-CA-041



NATIONAL SHERIFFS' ASSOCIATION

Hidalgo County Sheriffs Office
Rafael Garza
711 El Cibolo Rd
P O Box 1228
Edinburg, TX 78540

December 06, 2010

Dear Valued Member:

Thank you for taking a moment to renew your membership with the National Sheriffs' Association (NSA). We need your support now more than ever!

NSA is dedicated to raising the level of knowledge and professionalism of law enforcement through training programs in court security, crime prevention, crime victim services, domestic violence, homeland security initiatives, jail operations, traffic safety, and Triad. NSA persistently fights to protect and preserve the Office of Sheriff and works vigorously to increase funding for critical federal law enforcement programs. We will keep you updated on the latest issues concerning law enforcement and your neighborhoods with our magazines and weekly E-newsletters.

There are many additional benefits of NSA membership including: free Accidental Death & Dismemberment Insurance up to \$10,000*; voting privileges* and discounted registration at NSA's Annual Conference & Exhibition; an NSA Affinity Visa Card through Justice Federal Credit Union; discounts to attend colleges; discounts on insurance plans; discounts on SafeAssured ID kits; discounts on car rentals, hotels, and travel for Orlando, Florida attractions; discounts with MyHomeBenefits; discounts on Apple products; and much more! **To view more details about your NSA member benefits or to renew online, please go to www.sheriffs.org and click on NSA Login in the upper left-hand corner of the page.**

We hope you will take this opportunity to renew your membership today. Please find an itemized membership renewal form below. Feel free to contact the Membership Department at (800) 424-7827 x201 with any questions regarding your membership or benefits.

* excluding Auxiliary Members

1st RENEWAL NOTICE

Please detach and mail with your check or provide Credit Card information below

Paid Thru	Code	Description	Amount
02/28/2011	NSA	NSA Membership Dues	\$35.00

Total Amount Due: \$35.00

Member ID: 256137 I would like to make a donation of \$ _____ to the NSA Sheriff's Relief Fund.

Visa MasterCard AMEX Discover Payment Total \$ _____

Credit Card # _____ Expiration Date: ____/____

Security Code: _____ (3-digit number found on the back signature panel of the Visa, MasterCard, Discover or 4-digit number found on the front of the AMEX)

Print Cardholder's Name _____ Signature _____