

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Miguel A. Garcia, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

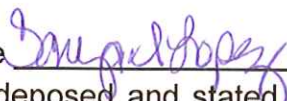
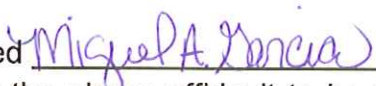
- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
 - Publications
 - Periodicals
 - Training
 - Annual Conference
 - Award Programs
 - Representation
 - Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

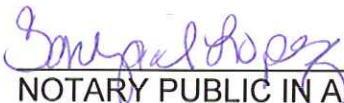
I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: 
TITLE: Criminal Investigator

DATE: 6/20/2014

Before me , a Notary Public, appeared , 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.




NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026
COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW: PID#: 294162

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Garcia First Name: Miguel MI: A.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539
3100 S. Closner Foxtrot

Agency Phone: (956) 381-0444 Contact Phone: () _____
mgarcia@hidtataskforce.us

Email: _____ Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, John J. Marchan, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

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- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
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 - Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: _____

DATE: 6/20/2014

TITLE: Border Patrol Agent

Before me _____, a Notary Public, appeared _____, 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.

(S E A L)

NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW: PID#: _____

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Marchan First Name: John MI: J.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719
3100 S. Closner Foxtrot

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539

Agency Phone: (956) 381-0444 Contact Phone: () _____
jmarchan@hidtataskforce.us

Email: _____ Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X _____

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
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**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Genovevo Martinez, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

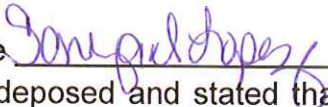
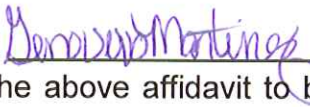
- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
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 - Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

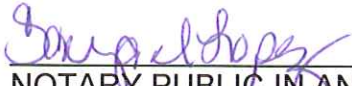
I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: 
TITLE: Criminal Investigator

DATE: 6/20/2014

Before me , a Notary Public, appeared , 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.




NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: ___ RENEW: X PID#: 96825

REGION: North ___ South X East ___ West ___ Central ___ (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active X Associate ___ Sustaining ___ Life ___

Last Name: Martinez First Name: Genovevo MI: ___

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719
3100 S. Closner Foxtrot

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539

Agency Phone: (956) 381-0444 Contact Phone: () _____

Email: gmartinez@hidtataskforce.us Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Dora L. Munoz, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
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- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
 - Publications
 - Periodicals
 - Training
 - Annual Conference
 - Award Programs
 - Representation
 - Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: _____

Dora L. Munoz

DATE: 6/20/2014

TITLE: Commander

Before me Sonya I Lopez, a Notary Public, appeared Dora L. Munoz, 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.



Sonya I Lopez
NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW:

PID#: 87787

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Munoz First Name: Dora MI: L.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719
3100 S. Clossner Foxtrot
Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539

Agency Phone: (956) 381-0444 Contact Phone: () _____
dmunoz@hidtataskforce.us

Email: _____ Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X *Dora Munoz*

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
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**THE STATE OF TEXAS
COUNTY OF HIDALGO**


I, Palmira Munoz, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:

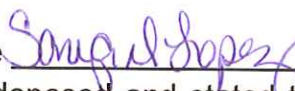
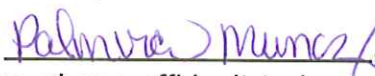
- Publications
- Periodicals
- Training
- Annual Conference
- Award Programs
- Representation
- Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: 
TITLE: Intel-Research Specialist

DATE: 6/20/2014

Before me , a Notary Public, appeared , 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.




NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026
COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW: PID#: _____

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Munoz First Name: Palmira MI: _____

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539
3100 S. Closner Foxtrot

Agency Phone: (956) 381-0444 Contact Phone: () _____

Email: pmunoz@hidtataskforce.us Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X 

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Hugo Rangel, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

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- Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: [Signature]
TITLE: Deputy Constable

DATE: 6/20/2014

Before me [Signature], a Notary Public, appeared Hugo Rangel, and on his/her oath depose and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



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

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW: PID#: 23452

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Rangel First Name: Hugo MI:

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539
3100 S. Closner Foxtrot

Agency Phone: (956) 381-0444 Contact Phone: ()
hrangel@hidtataskforce.us

Email: Insurance Beneficiary:

Sponsor: Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number:

3 digit security code on back of card: Expiration Date:

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X 

Please submit application to
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
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**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Roger W. Rich, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

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- Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: _____

DATE: 6/20/2014

TITLE: Criminal Investigator

Before me Sonyal Lopez, a Notary Public, appeared Roger W. Rich, and on his/her oath depose and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



Sonyal Lopez
NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW: PID#: 33372

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Rich First Name: Roger MI: W.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539
3100 S. Closner Foxtrot

Agency Phone: (956) 381-0444 Contact Phone: () _____
rrich@hidtataskforce.us

Email: _____ Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X 

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

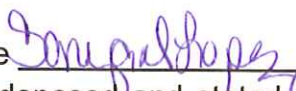
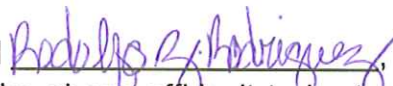
I, Rodolfo Z. Rodriguez, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

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 - Technical Inquiry Services


FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE:  DATE: 6/20/2014
TITLE: Criminal Investigator

Before me , a Notary Public, appeared , 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.




NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW: PID#: 270862

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Rodriguez First Name: Rodolfo MI: Z.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719
3100 S. Closner Foxtrot
Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539

Agency Phone: (956) 381-0444 Contact Phone: () _____
zrodriguez@hidtataskforce.us

Email: _____ Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X [Handwritten Signature]

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Juan P. Sifuentes, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

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- Award Programs
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- Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: _____

Juan P. Sifuentes

DATE: 6/20/2014

TITLE: Criminal Investigator

Before me Sonyal Lopez, a Notary Public, appeared Juan P. Sifuentes, 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.



Sonyal Lopez
NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

COUNTY AUDITOR'S FORM: RE-CA-041B
REVISED: 12-2012

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: RENEW:

PID#: 258075

REGION: North South East West Central (Please check one)

ACTIVE (Commissioned) \$40

SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40

LIFE (Restricted)

Date: 6/20/14 Applying as: Active Associate Sustaining Life

Last Name: Sifuentes First Name: Juan MI: P.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539
3100 S. Closner Foxtrot

Agency Phone: (956) 381-0444 Contact Phone: () _____

Email: jsifuentes@hidtataskforce.us

Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X *Juan P. Sifuentes*

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax

**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

I, Christopher R. Yates, do hereby state that membership in the Texas Narcotic Officers Association, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
 - Publications
 - Periodicals
 - Training
 - Annual Conference
 - Award Programs
 - Representation
 - Technical Inquiry Services

FOR STATEWIDE ASSOCIATIONS ONLY

I further state that Texas Narcotic Officers Association is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: _____
TITLE: Assistant Commander

DATE: 6/20/2014

Before me Sonya I Lopez, a Notary Public, appeared Christopher R. Yates, and on his/her oath depop and stated that the facts as set forth in the above affidavit to be true and correct in every respect.

(SEAL)



Sonya I Lopez
NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026

Texas Narcotic Officers Association Membership Application



"Contributions or gifts to TNOA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses"

Applicants must complete the information below and submit it with the application fee. Membership is good for one year.

DUES: NEW: ___ RENEW: X PID#: 103998

REGION: North ___ South X East ___ West ___ Central ___ (Please check one)

ACTIVE (Commissioned) \$40 SUSTAINING (Supporter) \$50

ASSOCIATE (Non-Commissioned) \$40 LIFE (Restricted)

Date: 6/20/14 Applying as: Active X Associate ___ Sustaining ___ Life ___

Last Name: Yates First Name: Christopher MI: R.

Mailing Address: P.O. Box 5719, McAllen, Texas 78502-5719

Agency: Agency Address: Hidalgo County HIDTA Task Force/Edinburg, TX 78539
3100 S. Closner Foxtrot

Agency Phone: (956) 381-0444 Contact Phone: () _____

Email: cyates@hidtataskforce.us

Email: _____ Insurance Beneficiary: _____

Sponsor: _____ Agency: Hidalgo County HIDTA Task Force

Credit Card Information: (VISA/MC) Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

As a member of the Texas Narcotic Officers Association, I swear to abide by and uphold the Constitution and maintain the integrity of the association.

Signature of applicant : X _____ 6/20/2014

Please submit application to:
Texas Narcotic Officers Association
1790 Lee Trevino Dr, Suite #505
El Paso, Texas 79936
915/629-0055
915/629-0059 fax