

**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, Norma Longoria, do hereby state that membership in the Texas Ass. of WIC Directors, 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

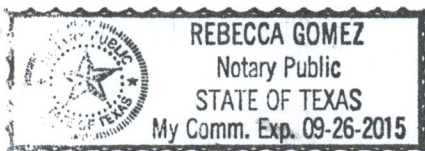
I further state that Texas Association of WIC Directors is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: Norma L. Longoria
TITLE: WIC Director

DATE: 12/3/14

Before me Rebecca Gomez, a Notary Public, appeared Norma L. Longoria, 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.

(SEAL)



Rebecca Gomez
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 ASSOCIATION OF LOCAL WIC DIRECTORS
ANNUAL MEMBERSHIP DUES
January 1st – December 31st, 2015

PLEASE PRINT OR TYPE

Local Agency Hidalgo County WIC Program Local Agency # 12

Address 3105 W. University Dr.
Finburg, Texas 78539

Phone (956)381-4646 Fax (956) 380-4056

Email norma.longoriaawic.co.hidalgo.tx.us

Voting Representative *Norma Longoria*
(WIC Director or Designee)

Annual Dues: \$125.00 Payable by December 31, 2013 for calendar year Jan. 1-Dec. 31, 2015

Pay by check or credit card. If paying by credit card: Name on card _____

Credit Card Number _____

Expiration date _____ Signature _____

Payable to: Texas Association of Local WIC Directors

Mail to: TALWD
P.O. Box 49276
Austin, Texas 78765

THE IMPORTANCE OF TALWD MEMBERSHIP:

TALWD acts as a vehicle for the expression of ideas on planning, policy, coordination, implementation and administration of the WIC Program on the local, state and federal level.

TALWD fosters communication between local WIC Programs and the Texas Department of Health with the goal of positively effecting the administration of WIC within the state.

TALWD brings together the administrators of the local agency WIC Programs in order to promote peer support, orientation and/or assistance.

TALWD promotes professional and public awareness of new and existing federal and state legislation.

Membership in TALWD represents an agency membership.