

**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, Aaron Moreno, do hereby state that membership in the National Tactical 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

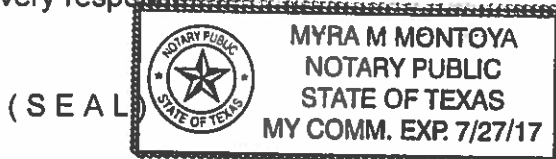
FOR STATEWIDE ASSOCIATIONS ONLY

I further state that National Tactical Officers Assoc. is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: *Aaron Moreno*
TITLE: Sergeant

DATE: 5/6/15

Before me *Myra M. Montoya* a Notary Public, appeared Aaron Moreno, 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.



Myra M. Montoya
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



NTOA Membership Application

PO Box 797, Doylestown, PA 18901 | p: 800-279-9127, ext. 110 | f: 215-230-7552 | www.ntoa.org

PLEASE CHECK MEMBERSHIP TYPE

INDIVIDUAL

"The Tactical Edge" Membership

- U.S. Membership.....\$40
- Canada Membership.....\$45
- Foreign Membership.....\$45

TEAM

"The Tactical Edge" Membership

- U.S./Canada Membership.....\$150
- Foreign Membership.....\$200

Do you want to receive the latest training information and updates from NTOA?
Include a team roster and email addresses with your application.

Home/Agency Address or Point of Contact (POC) Change?

Update online anytime at www.ntoa.org; Member Resources > Update Address/Contact

THE FOLLOWING ID IS REQUIRED BY ALL APPLICANTS (TEAM MEMBERSHIPS ONLY REQUIRE POINT OF CONTACT ID)

- **Full-time sworn law enforcement officers must provide:**
A photocopy of law enforcement ID or an agency letterhead statement from applicant's direct supervisor verifying applicant's law enforcement status.
- **Correction and non-sworn TEMS officers must provide:**
Current agency letterhead statement from the SRT/tactical team commander verifying applicant's role within the team. Non-sworn members must submit updated verification with renewal payment each year.
- **Foreign (other than Canadian) must provide:**
Foreign applicants must submit their application with a letter from the Consular Officer or Regional Security Officer of the American Embassy verifying that applicant's credentials are true and accurate.

Applications received without proper documentation and/or incorrect payment amount will be returned.

VISIT: WWW.NTOA.ORG TO JOIN ONLINE

REFERRAL ID# _____

INDIVIDUAL APPLICANT

Send my publication to: Home Agency

First Name _____ MI _____ Last Name _____ Rank _____
 Assignment FT SWAT PT SWAT FT CNT PT CNT Collateral Duty Patrol SWAT Investigations TEMS Bomb Tech
 Home Address _____ Apartment No. _____ City _____ State _____ Zip _____
 Home Email _____ Personal Agency Email _____
 Home Phone _____ Cell Phone _____

TEAM APPLICANT

POC First Name AARON MI _____ Last Name MORENO Rank SERGEANT

POC Email aaron.moreno@hidalgo.org

Team Name HIDALGO COUNTY SHERIFF'S OFFICE

Team Status (check one) Full Time Part Time

Multi-jurisdictional? No Yes If yes, list other departments on team _____

No. of Tactical Members _____ No. of Negotiators _____ No. TEMS _____ No. Sworn TEMS _____ No. Bomb Technicians _____ No. of Breachers _____

Multi-Geographic Area Served _____ Multi-Jurisdictional population served _____ No. Training Hours _____

AGENCY INFORMATION (Individual and team applicants please complete.)

Agency Name HIDALGO COUNTY SHERIFF'S OFFICE

Agency Street Address 711 EL CIBOLO ROAD

Suite No. _____

City EDINBURG

State TEXAS

Zip 78539

Agency Email aaron.moreno@hidalgo.org

Agency Phone 956-383-8114

Agency Fax 956-393-6179

Population Served by Agency _____

No. of Sworn Officers in Agency _____

PAYMENT INFORMATION (Please make checks payable to NTOA. Mail application/ID to: NTOA, PO Box 797, Doylestown, PA 18901. If paying by credit card, fax application and ID to: 215-230-7552.)

Check Amount \$ _____ Check or Money Order Number _____ Purchase Order Number _____

Credit Card: Visa Mastercard American Express Card Number _____ Exp. Date _____

(For VISA & MC - last 3 digits in signature line _____) (For AMEX: 4 digits in small print on card front _____)

Name as it appears on Credit Card _____

Credit Card Billing Address _____

Credit Card Email _____ Credit Card Phone _____

Cardholder Signature _____