

**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, MARIA ARCILIA DURAN, CPA, do hereby state that membership in the Association of Certified Fraud Examiners, 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

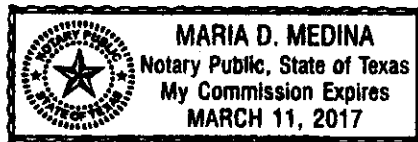
**FOR STATEWIDE ASSOCIATIONS ONLY**

I further state that \_\_\_\_\_ is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: *Maria Arcilia Duran* DATE: 6/3/15  
TITLE: DIRECTOR OF AUDIT DIVISION

Before me MARIA D. MEDINA, a Notary Public, appeared MARIA ARCILIA DURAN, CPA, 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.

(SEAL)



*Maria D. Medina*  
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