

**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, BELINDA G. MADRIGAL, do hereby state that membership in the AMERICAN JAIL 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

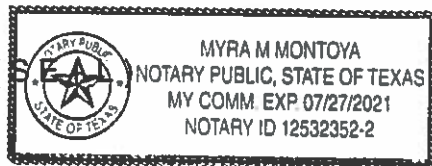
**FOR STATEWIDE ASSOCIATIONS ONLY**

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

SIGNATURE: *Belinda G. Madrigal*  
TITLE: CAPTAIN

DATE: 3/29/2019

Before me *Myra M. Montoya* a Notary Public, appeared BELINDA G. MADRIGAL, 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

**From:** "Belinda Madrigal" <belinda.madrigal@hidalgoso.org>  
**To:** "rosie hinojosa" <rosie.hinojosa@hidalgoso.org>  
**Sent:** Tuesday, February 20, 2018 11:55:40 AM  
**Subject:** Fwd: Member Pending Invoice

Sent from my iPhone

Begin forwarded message:

**From:** "[membership@aja.org](mailto:membership@aja.org)" <[membership@aja.org](mailto:membership@aja.org)>  
**Date:** February 20, 2018 at 11:42:04 AM CST  
**To:** "[Belinda.Madrigal@hidalgoso.org](mailto:Belinda.Madrigal@hidalgoso.org)" <[Belinda.Madrigal@hidalgoso.org](mailto:Belinda.Madrigal@hidalgoso.org)>  
**Subject:** Member Pending Invoice

Please find your invoice below. You may pay online by logging into your account or submit payment to our remit to address below.

**Please reference the Invoice Number and/or Contact ID Number with your payment.**

Thank you,  
American Jail Association



## INVOICE

Tuesday, February 20, 2018  
Invoice No: 6594  
Member ID: 999520  
Contact ID: 1778987

**Bill To:**

Hidalgo County Sheriff's Office  
Attn: Belinda Madrigal  
P.o. Box 1228  
Edinburg, TX 78540

**Remit Payment To:**

American Jail Association  
P.O. Box 65048  
Baltimore, MD, 21264-5048

DESCRIPTION	UNIT PRICE	QTY	AMOUNT
Membership Renewal Member Type: Professional thru: 3/31/2019	\$48.00	1	\$48.00
TERMS: Net 30			
<b>Subtotal</b>			\$48.00
<b>Sales Tax</b>			\$0.00
<b>Prior Payments</b>			\$0.00
<b>TOTAL DUE</b>			\$48.00

**Thank you for your support!**

**Questions?** Please contact the American Jail Association at 301-790-3930.

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

I, JOSE R. VASQUEZ, do hereby state that membership in the AMERICAN JAIL 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:
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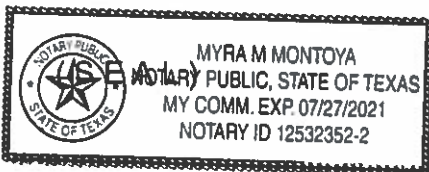
**FOR STATEWIDE ASSOCIATIONS ONLY**

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

SIGNATURE:   
TITLE: CAPTAIN

DATE: 03-28-19

Before me Myra M. Montoya a Notary Public, appeared JOSE R. VASQUEZ, 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.



  
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

# AJA Membership Application



The American Jail Association is a national, nonprofit organization dedicated to serving those who work in and operate our Nation's jails. We accomplish this by providing training and professional development, educational resources, personal certification, publications, networking opportunities, and advocacy at State and national levels—all designed to increase professionalism in the field and to help jails and detention facilities be safer for both staff and inmates.

Fax to 301-790-2941 or e-mail to [membership@aja.org](mailto:membership@aja.org). Once the application is received and processed, you will receive a new member packet.\* For additional information, visit [aja.org](http://aja.org).

Please place an "X" in the type of membership:\*\*

- Professional Membership (U.S.) \$48  
(For those individuals working in a jail facility)
- Life Member—\$500 (single or pro-rated)
- Student Membership—\$15 (U.S. only)  
(Available to full-time students not currently employed in the field of corrections—include copy of full-time student ID)
- Subscription to *American Jails* magazine only—\$88
- Retiree Membership—\$36 (U.S. Only)
- Canadian \$54
- Single payment
- Graduate Date: \_\_\_\_\_  
(Private, nonprofit organizations—evidence of nonprofit status must accompany application)
- International \$66
- Four Annual payments of \$125
- Affiliate Membership—\$100  
(Private, nonprofit organizations—evidence of nonprofit status must accompany application)

### Areas of Concentration

Choose only one:

- Administration
- Chaplaincy
- Classification
- Food Service
- Human Services
- Inmate Programs
- Intake and Release
- Juvenile
- Law Enforcement
- Medical Care
- Mental Health
- Information Systems/Technology
- Substance Abuse Counselor
- Training
- Volunteer
- Other

Name: JOSE R. VASQUEZ Rank: CAPTAIN

Job Title: CAPTAIN Certifications: \_\_\_\_\_

Send my magazine and new member packet to:  Home Address  Work Address

Address: 711 EL CIBOLO ROAD Suite/Apt. #: \_\_\_\_\_

City: EDINBURG State: TEXAS ZIP: 78542

Phone: Office: 956-393-6023 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Agency: HIDALGO COUNTY SHERIFF'S OFFICE

Agency Address: 711 EL CIBOLO ROAD

Facility Name and Address: \_\_\_\_\_

E-mail Address (required): SILVIA.LOZANO@HIDALGOSO.ORG

I was referred by: \_\_\_\_\_ His/Her agency is: \_\_\_\_\_

Gender:  Male  Female Birth Month: \_\_\_\_\_ Year Graduated High School: \_\_\_\_\_

Education:  High School Graduate  Associate's Degree  Bachelor's Degree  Master's Degree  Doctorate

Year you entered the field of corrections: \_\_\_\_\_ Rate of Capacity: \_\_\_\_\_

Agency Category:  Federal  State  County  Other \_\_\_\_\_

Have you previously been a member of AJA?  Yes  No

How did you learn about AJA?  Internet  *American Jails* magazine  Mailing  AJA Conference or Training Event  
 AJA Member  Other \_\_\_\_\_

### Interests:

- Cars
- Cooking
- Crafting
- Fitness
- Gardening
- Hunting/Fishing
- Music
- Outdoor Recreation
- Photography
- Reading
- Sports
- Traveling
- Other

Payment Type:  Check  Purchase Order  Credit Card (Circle one) *VISA MasterCard American Express Discover*  
(Payable to the American Jail Association in U.S. funds drawn on a U.S. bank)

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Verification on Back: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

\*Membership fee is nonrefundable and nontransferable. \*\*Membership contact information is accessible to AJA staff and other AJA members.

Please remit payment to: American Jail Association, PO Box 65048, Baltimore, MD 21264-5048