



Texas Criminal Defense Lawyers Association

Membership Application

(Effective 4/2019)

Contact Information

Your membership is effective upon approval of application and receipt of annual membership dues.

Mr. Ms. Mrs.

Robert Z. Handy

Name (first, middle, last)

100 N. Clossner, 5th Floor

Address

Hidalgo Co.

County

956-292-7040 ext. 5434

Phone

210-550-8046

Cell phone

Hispanic

Ethnicity*

Date of Birth*

Edinburg, TX 78539

City, State, Zip

956-292-7049

Fax

Public Defender's Office

Business

robert.handy@co.hidalgo.tx.us

Email

Website

24116481, 10/21/19

Bar Card Number/Date Licensed

Texas

Member of Local Bar

New-Member Endorsement (must be completed for new members)

As a current member of TCDLA, I believe this applicant to be a person of professional competency, integrity and good moral character.

Vanessa Mendoza

Printed Name of Endorser

Vanessa Mendoza

Signature of Endorser

*These questions are optional and for internal statistics only. The information provided will not be distributed at any time.

Membership Fees

Membership Category and Yearly Fees:

\$_____ \$100 First-time (\$100 for each of the first two years)

\$_____ \$180 Regular member

\$X \$60 Public defender (must be a PD employee)

\$_____ \$330 Voluntary sustaining (required for TCDLA officers and directors)

\$_____ \$100 TCDLA past president

\$_____ \$80 Distinguished member (70+ years old)

\$_____ \$20 Law student (not auto-renew)

\$_____ \$80 Affiliate (Paralegal Investigator Expert Other (law professors & others approved by board)

I prefer not to participate in auto-renewal

\$_____ Total

Get Involved: Committees/Lawyer Locator

I'm interested in serving on a committee—send information.

Send me a Board application.

Yes! Include me in the online Lawyer Locator.** You may list up to three areas of specialty in criminal defense law for public access (example: DWI, sexual assault, appeals).

**Disclaimer: Provider makes no promises, guarantees, or warranties regarding the attorneys listed on its Lawyer Locator. Said attorneys are TCDLA members who have requested inclusion on provider's website to provide the public with choices for possible legal services. Provider expressly disclaims all warranties, including the warranties of merchantability, fitness for a particular purpose, and non-infringement. Moreover, content contained on or made available through this website is not intended to and does not constitute legal advice, and no attorney-client relationship is formed. The accuracy, completeness, adequacy, or currency of the content is not warranted or guaranteed. Your use of information on the website or materials linked from the website is at your own risk.

I would like to donate to the TCDLEI scholarship fund, 501(c)(3) organization, in the amount of \$ _____.

Payment Method

For your convenience, TCDLA uses AUTO RENEWAL for all membership dues, using your checking account or credit card. You will be automatically enrolled in the auto-renewal program so you do not have to do anything while continuing to enjoy membership benefits every year! You can always opt out of auto-renewal anytime by simply contacting TCDLA by emailing mrendon@tccla.com or by checking the opt-out option above.

As the account holder at the financial institution I have designated for Automatic Draft, I authorize TCDLA to automatically draft the account I have designated and I authorize my financial institution to debit my payments automatically from the Draft Account on the date the payment is due. I further understand and agree as follows:

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Name of Institution* Financial Institution 9-Digit Routing # _____ Account # _____

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Mr. Ms. Mrs.

James M. Sahadi

Name (first, middle, last)

100 N. Closner

Address

Hidalgo

County

956/292-7040

Phone

Public Defender's Office

Business

james.sahadi@co.hidalgo.tx.us

Email

Website

24025941 06/08/2000

Bar Card Number/Date Licensed

Date of Birth*

Edinburg, TX 78539

City, State, Zip

Ethnicity*

Cell phone

Fax

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Printed Name of Endorser

Jose Ozuena

Signature of Endorser

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\$_____ **Total**

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Mr. Ms. Mrs.

JACOB LEE SALINAS
Name (first, middle, last)

_____ Date of Birth*
HISPANIC
Ethnicity*

100 N. CUGNER BLVD. 5TH FLOOR
Address

EDINBURG, TEXAS 78539
City, State, Zip

HIDALGO (956) 292-7040
County Phone

(956) 292-7049
Cell phone Fax

PUBLIC DEFENDERS OFFICE
Business

Jacob.salinas@co.hidalgo.tx.us
Email Website

24090651
Bar Card Number/Date Licensed

Member of Local Bar

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Jose Bravo
Printed Name of Endorser

Jose Bravo
Signature of Endorser

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