



American Society for
Public Administration

Membership Renewal Invoice

1730 Rhode Island Ave., NW, Suite 500, Washington, DC 20036
(202) 393-7878 | (202) 638-4952 Fax | membership@aspanet.org

BILL TO

Annette C. Muniz
Hidalgo County Clerk's Office
100 North Closner
Edinburg, TX 78539

Account No. 96440
Invoice Date 12/13/2022
Membership Exp. 1/31/2023

RENEWAL FEES	UNIT PRICE	AMOUNT
Member Individual Full	\$130.00	\$130.00
TX-North Texas	Included	Included
Section on Public Management Practice	\$10.00	\$10.00

Invoice Total: \$140.00

SUSTAINING ASPA

Please direct my contribution to the **ASPA Endowment** to support ASPA's future growth

Please direct my contribution to **ASPA Operations** to support our ongoing programs and activities.

Donation Total:

Account # 96440

Payment Information

- Check, made payable to ASPA*
- Credit Card
 - VISA MasterCard American Express

Card Number: _____ Exp. Date: _____

Name on Card: _____ Signature: _____

Thank you for your membership!

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