

INVOICE #**288107**

Registered By: John Pena (john.pena@da.co.hidalgo.tx.us)

Invoice Date 4/1/2026

Invoice Amount \$85.00

Amount Paid \$0.00

Amount Due \$85.00

Paid Date



505 W. 12th St., Ste 100 • Austin, TX 78701 • 512-474-2436

Membership Dues Invoice**Member Information:**

Personal ID:

Title:

First Name:

Middle:

Call Name:

Last Name:

Suffix:

Position:

Employer:

Office Address 1:

Office Address 2:

Office City:

Office State:

Office Zip:

Office Phone:

Office Fax:

BAR Number:

PID Number:

Membership

Expiration Date:

Membership Dues:

REGULAR MEMBERSHIP - Open to full time employees of Texas county prosecutors' offices.

ASSOCIATE MEMBERSHIP - Open to anyone who wishes to become a member of TDCAA. (This category includes General and Law Student only)

Your membership level is below:

-Assistant prosecutor \$85.00

Payment Options:

TDCAA Membership dues are payable by check or credit card.

If you are paying by check, please make the check payable to TDCAA and send the payment to:

The Texas District and County Attorneys Association
Attn: Kaylene Braden
505 West 12th Street, Ste. 100
Austin, TX 78701

Please include a copy of the invoice with the check.

If you would like to pay your dues by credit card, please email Kaylene Braden at kaylene.braden@tdcaa.com.

Payment Method:

INVOICE #**288109**

Registered By: John Pena (john.pena@da.co.hidalgo.tx.us)

Invoice Date 4/1/2026

Invoice Amount \$85.00

Amount Paid \$0.00

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Paid Date



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Membership Dues Invoice**Member Information:**

Personal ID:	<input type="text" value="144071"/>
Title:	<input type="text" value="Mr."/>
First Name:	<input type="text" value="Ramon"/>
Middle:	<input type="text"/>
Call Name:	<input type="text" value="Ray"/>
Last Name:	<input type="text" value="Benavides"/>
Suffix:	<input type="text"/>
Position:	<input type="text" value="Asst. Criminal District Attorney"/>
Employer:	<input type="text" value="Hidalgo County - CDA"/>
Office Address 1:	<input type="text" value="100 E. Cano St."/>
Office Address 2:	<input type="text"/>
Office City:	<input type="text" value="Edinburg"/>
Office State:	<input type="text" value="TX"/>
Office Zip:	<input type="text" value="78539"/>
Office Phone:	<input type="text" value="956.292.7600"/>
Office Fax:	<input type="text" value="956.318.2078"/>
BAR Number:	<input type="text" value="00796192"/>
PID Number:	<input type="text"/>

Membership Expiration Date:	<input type="text" value="5/1/2026"/>
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Membership Dues:

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ASSOCIATE MEMBERSHIP - Open to anyone who wishes to become a member of TDCAA. (This category includes General and Law Student only)

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INVOICE #**288111**

Registered By: John Pena (john.pena@da.co.hidalgo.tx.us)

Invoice Date 4/1/2026

Invoice Amount \$85.00

Amount Paid \$0.00

Amount Due \$85.00

Paid Date



505 W. 12th St., Ste 100 • Austin, TX 78701 • 512-474-2436

Membership Dues Invoice**Member Information:**

Personal ID:	<input type="text" value="144139"/>
Title:	<input type="text" value="Mr."/>
First Name:	<input type="text" value="Patrick"/>
Middle:	<input type="text" value="Andrew"/>
Call Name:	<input type="text" value="Patrick"/>
Last Name:	<input type="text" value="Nitsch"/>
Suffix:	<input type="text"/>
Position:	<input type="text" value="Asst. Criminal District Attorney"/>
Employer:	<input type="text" value="Hidalgo County - CDA"/>
Office Address 1:	<input type="text" value="100 E. Cano St."/>
Office Address 2:	<input type="text"/>
Office City:	<input type="text" value="Edinburg"/>
Office State:	<input type="text" value="TX"/>
Office Zip:	<input type="text" value="78539"/>
Office Phone:	<input type="text" value="956.292.7600"/>
Office Fax:	<input type="text" value="956.318.2078"/>
BAR Number:	<input type="text" value="00795854"/>
PID Number:	<input type="text"/>

Membership Expiration Date:	<input type="text" value="5/1/2026"/>
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ASSOCIATE MEMBERSHIP - Open to anyone who wishes to become a member of TDCAA. (This category includes General and Law Student only)

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-Assistant prosecutor \$85.00

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INVOICE #**288113**

Registered By: John Pena (john.pena@da.co.hidalgo.tx.us)

Invoice Date 4/1/2026

Invoice Amount \$85.00

Amount Paid \$0.00

Amount Due \$85.00

Paid Date



505 W. 12th St., Ste 100 • Austin, TX 78701 • 512-474-2436

Membership Dues Invoice**Member Information:**

Personal ID:	<input type="text" value="121617"/>
Title:	<input type="text" value="Ms."/>
First Name:	<input type="text" value="Rebecca"/>
Middle:	<input type="text" value="Marie"/>
Call Name:	<input type="text" value="Rebecca"/>
Last Name:	<input type="text" value="Saldana"/>
Suffix:	<input type="text"/>
Position:	<input type="text" value="Asst. Criminal District Attorney"/>
Employer:	<input type="text" value="Hidalgo County - CDA"/>
Office Address 1:	<input type="text" value="100 E. Cano St."/>
Office Address 2:	<input type="text"/>
Office City:	<input type="text" value="Edinburg"/>
Office State:	<input type="text" value="TX"/>
Office Zip:	<input type="text" value="78539"/>
Office Phone:	<input type="text" value="956.292.7600"/>
Office Fax:	<input type="text" value="956.318.2078"/>
BAR Number:	<input type="text" value="24098369"/>
PID Number:	<input type="text"/>

Membership Expiration Date:	<input type="text" value="5/1/2026"/>
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 (This category includes General and Law Student only)
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Payment Method:	Payment by Check
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INVOICE #**288115**

Registered By: John Pena (john.pena@da.co.hidalgo.tx.us)

Invoice Date 4/1/2026

Invoice Amount \$85.00

Amount Paid \$0.00

Amount Due \$85.00

Paid Date



505 W. 12th St., Ste 100 • Austin, TX 78701 • 512-474-2436

Membership Dues Invoice**Member Information:**

Personal ID:	<input type="text" value="144137"/>
Title:	<input type="text" value="Mr."/>
First Name:	<input type="text" value="Jorge"/>
Middle:	<input type="text"/>
Call Name:	<input type="text" value="Jorge"/>
Last Name:	<input type="text" value="Villagomez"/>
Suffix:	<input type="text"/>
Position:	<input type="text" value="Asst. Criminal District Attorney"/>
Employer:	<input type="text" value="Hidalgo County - CDA"/>
Office Address 1:	<input type="text" value="100 E. Cano St."/>
Office Address 2:	<input type="text"/>
Office City:	<input type="text" value="Edinburg"/>
Office State:	<input type="text" value="TX"/>
Office Zip:	<input type="text" value="78539"/>
Office Phone:	<input type="text" value="956.292.7600"/>
Office Fax:	<input type="text" value="956.318.2078"/>
BAR Number:	<input type="text" value="24144614"/>
PID Number:	<input type="text"/>

Membership Expiration Date:	<input type="text" value="5/1/2026"/>
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Payment Method:	Payment by Check
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