



Membership Invoice

June 20, 2020

Business: _____

Invoice #: Business 2020

Address: _____

Payable upon receipt

City: _____, State: _____ Zip: _____

QTY	Description	Cost
1	Business Membership @ \$30.00/Person (7/1/20-6/30/21)	\$ _____
Total Membership Due:		\$ _____

Listed Members Below. Also, please let us know how long these folks have been a Lister/Assessor.

Name	Yrs	Name	Yrs	Name	Yrs

VALA's Annual Conference WILL be Held September 18, 2020 VIRTUALLY via Zoom. If you would like to attend the cost is \$25.00/person. Please fill out the attached Registration AND add the fee to this invoice OR sign up later.

Checks payable to **Vermont Assessors & Listers Association**

Remit to:

PLEASE INCLUDE A COPY OF YOUR INVOICE WITH YOUR PAYMENT

**VAL R. ALMOSNINO
POST OFFICE BOX 83
W RUPERT VT 05776**

Questions? Membership.Coordinator@valavt.org