



Membership Invoice

June 20, 2021

Business: \_\_\_\_\_

Invoice #: Business 2021

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

Payable upon receipt

City: \_\_\_\_\_

, State: \_\_\_\_\_

Zip: \_\_\_\_\_

QTY	Description	Cost
	Business Membership(s) @ \$30.00/Person (7/1/21-6/30/22)	\$ _____
	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

Continue on reverse if necessary

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

Remit to:

PLEASE INCLUDE A COPY OF THIS INVOICE WITH YOUR PAYMENT

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

Questions? [Membership.Coordinator@valavt.org](mailto:Membership.Coordinator@valavt.org)