

INVOICE

2010 MEMBERSHIP DUES

MARYLAND VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER (MDVOAD)

SEND PAYMENT TO:

MDVOAD

6400 Baltimore National Pike, #162

Baltimore, MD 21228

(Fed ID # 52-1830327)

ANNUAL MEMBERSHIP FEES:

FULL MEMBER - \$150

ASSOCIATE MEMBERS - \$100

ORGANIZATION NAME: _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL ADDRESS: _____

Your organization/agency shall be registered as a: **FULL** or **ASSOCIATE** member of MDVOAD and has agreed as part of its membership to submit *“annual dues to help cover the costs of operation (i.e. postage, printing, and other administrative cost as determined by the MDVOAD Executive Committee.”*

Please remit a check or money order made payable to MDVOAD upon receipt of this invoice to the address listed above. Cancelled checks shall serve as proof of payment. Other acknowledgment of receipt is available upon request.

Thank you for your interest and cooperation.