

2018 DUES STATEMENT

PLEASE CHECK ONE OF THE FOLLOWING:

- FIRST YEAR ATTORNEY No Charge
- SECOND YEAR ATTORNEY \$ 120.00
- THIRD YEAR ATTORNEY \$ 145.00
- FOUR YEAR ATTORNEY & OVER \$ 185.00
- ASSOCIATE MEMBER \$ 120.00
(Attorneys outside of the Tri-County Area)
- RETIRED ATTORNEY \$ 50.00
(Age 65 or older, and practiced less than 50 years)
- HONORARY MEMBER \$ 0.00
(50+ Years and/or retired from active practice)

DUES: \$ _____

SUSTAINING MEMBER CONTRIBUTION: \$50.00 \$ _____

TOTAL: \$ _____

PLEASE WRITE SEPARATE CHECK FOR FOUNDATION CONTRIBUTION PAYABLE TO:

"MCBA FOUNDATION." (No Credit Cards Please)

FOUNDATION CONTRIBUTION: \$25.00 \$50.00 \$100.00 Other \$ _____

If dues for more than one member are paid by a firm check,
PLEASE COMPLETE AND RETURN THIS DUES STATEMENT FOR EACH ATTORNEY.

DATE DUE: UPON RECEIPT

Membership card will be issued when payment is received.

MAILING/BILLING ADDRESS (MUST BE COMPLETED)

PLEASE PRINT

NAME: _____

FIRM: _____

ADDRESS: _____

CITY, STATE, ZIP: _____ E-MAIL: _____

PHONE NO.: _____

FORM OF PAYMENT

CASH CHECK (No. _____) MASTER CARD VISA

Amount \$ _____ Account # _____ Exp. Date _____

SIGNATURE _____

(Credit Card Information Optional – May make payments at the bar office.)

SELECT PAYMENT TO THIS STATEMENT AND RETURN IT TO:

MAHONING COUNTY BAR ASSOCIATION
114 E. FRONT STREET, SUITE 100
YOUNGSTOWN, OHIO 44503

Message on reverse side