



**New Jersey Association of County Finance Officers
Membership Dues
Calendar Year 2024**

2024 Dues are payable for the calendar year January – December 2024

Please mail your checks payable to:
**NJ Association of County Finance Officers
c/o Brittany M. Smith, CPA, CCFO
County of Cape May
4 Moore Road, DN 103
Cape May Court House, NJ 08210**

- \$200 County CFO/Treasurer/Comptroller (1 only)
Name / Title _____
- \$ 50 First additional County member
Name / Title _____
- \$100 Each additional County member
Name / Title _____
Name / Title _____
Name / Title _____
- \$225 Associate Member (one member)
Name / Title _____
- \$175 Each additional Associate Member
Name / Title _____
Name / Title _____
Name / Title _____
- \$200 *Educational Member (one member) Annual Membership
Name / Title _____
Or
*Educational Member (one member) \$35 Per Meeting Fee
Name / Title _____
*See attached

\$_____ Total Payment

Please include with your payment, the attached verification of the name, title, address, phone number, fax number and e-mail address for each member.

CLAIMANTS' CERTIFICATION DECLARATION

I do solemnly declare and certify under the penalties of the Law that the bill/invoice statement is correct in all its particulars; that the materials/articles have been furnished or services rendered as stated herein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

Brittany M Smith, NJACFO VP/Treasurer

Signature and Title

April 22, 2024

Date

Please include with your payment a verification of the name, title, address, phone number, fax number, and e-mail address for each member. This information is essential for our accurate records and for future meeting notices. Copy this form if there are more than 4 members.

Name _____ Title _____

Address _____

Telephone _____ Fax _____

E-mail address _____

Name _____ Title _____

Address _____

Telephone _____ Fax _____

E-mail address _____

Name _____ Title _____

Address _____

Telephone _____ Fax _____

E-mail address _____

Name _____ Title _____

Address _____

Telephone _____ Fax _____

E-mail address _____

Educational Member Per Meeting Fee

Educational members may either pay the annual membership dues of \$200 or a \$35.00 per meeting fee which is payable at **each** meeting attended to by the educational member.

This per meeting fee entitles the member to receive the CEU's for individual meetings as approved by the Division of Local Government Services. The per meeting fee does not entitle the member to any other privileges afforded to annual membership, such as attendance at social outings sponsored by the Association.

The educational member **must** present a check at the meeting in order to receive the CEU certificate.