2020 VALTA MEMBERSHIP APPLICATION

Please add all requested information in the spaces provided.

R/A	Full Name	Title	Credentials	Phone	Fax	E-Mail Address

R = Regular Membership: Employees of Commissioners of the Revenue, Directors of Finance, or any other local government office performing duties of the Commissioner of the Revenue.
A = Associate Membership: All other local government employees interested in local tax issues. Associate members may not hold office, vote or make motions.
*** = Contact person**: This is the person you have designated to receive all correspondence for your locality.

Total members 2020

Members	Total Number	Cost Per Member	Total Paid	Mailing Address for All Members	
Regular Member		**$10**		**Locality:**	
Associate Member		**$10**		**Address:**	
Total					

PLEASE MAIL APPLICATION AND PAYMENT NO LATER THAN DECEMBER 27, 2019 TO:

VALTA
ATTN: KATHY O'BRIEN-BOWLES
City of Chesapeake Commissioner of the Revenue
PO Box 15285
Chesapeake, VA 23328-5285