

ANGELINA PHOTOGRAPHIC ASSOCIATION
P.O. BOX 153231
LUFKIN, TX 75915

Annual Dues: \$12.00

2014

Full
Name: _____

Mailing
Address _____
Street or P.O. Box

City State Zip

Spouse: _____

Home
Phone: _____

Business Phone: _____

Cell
Phone: _____

E-Mail Address: _____

Date Dues Paid: _____

Amount Paid: _____

Cash

Check Check # _____

**(Please place remittance in this envelope and
return it to the treasurer)**