



*Municipal Finance Officers  
Association of Ohio*

**2006-2007 MEMBERSHIP APPLICATION**  
(July through June)

**CONTACT NAME** \_\_\_\_\_ **TITLE** \_\_\_\_\_

**MUNICIPALITY** \_\_\_\_\_ **COUNTY** \_\_\_\_\_

**OFFICE MAILING ADDRESS** \_\_\_\_\_

\_\_\_\_\_ **ZIP + 4** \_\_\_\_\_

**OFFICE TELEPHONE** (\_\_\_\_) \_\_\_\_\_ **FAX** (\_\_\_\_) \_\_\_\_\_

(where you can be reached between 8 and 5 p.m.)

**E-MAIL ADDRESS** \_\_\_\_\_

**MEMBERSHIP FEE (PER CITY)** **\$50.00**

*Welcome to the Association!*

Make check payable to and return to: Municipal Finance Officers Association of Ohio  
175 South Third Street, Suite 510, Columbus, Ohio 43215-7100 <http://www.omunileague.org>