

Dues Statement for SCMSA 2007-2008

Name _____

General Membership

County, State and National (\$95) _____

County and State (\$55) _____

County Only (\$25) _____

Widows-Only County Dues are waived _____

Resident spouses (\$25) _____

Please mail your check payable to SCMSA . Send ASAP to:

SCMSA

4942 Higbee Ave. NW, Suite L, Canton, OH 44718