

**NATIONAL AUCTIONEERS LICENSE LAW OFFICIALS ASSOCIATION**  
**(N.A.L.L.O.A.)**

**RENEWAL BILLING FOR MEMBERSHIP**

**DATE OF THIS BILLING:**

**TO:**

**MEMBERSHIP DESIGNATION: ASSOCIATE MEMBER**

**AMOUNT DUE: \$75**

Please make your check payable to NALLOA and return it to the address listed below. Thank you for your prompt attention to this matter.

**The Federal Identification Number (FIN) for NALLOA is 47-0644721**

**BE SURE TO COMPLETE THE INFORMATION UPDATE REQUESTED BELOW**  
**PLEASE PRINT**

**Name of Individual or Business to be licensed** \_\_\_\_\_

**Business address, City, State and Zip Code** \_\_\_\_\_

**Business Area Code + phone number, and extension if applicable** \_\_\_\_\_

**E-mail address of licensee** \_\_\_\_\_

**Name of Contact person for licensee** \_\_\_\_\_

**E-mail address of Contact person (IMPORTANT)** \_\_\_\_\_

**Name of person completing this information** \_\_\_\_\_

**SEND RENEWALS AND FEE TO:**

**NALLOA Headquarters**  
**c/o Barbara Schoen**  
**10524 Providence Dr.**  
**Louisville, KY 40291**  
**Phone number (502) 239-6772**  
**e-mail: schoentime14@yahoo.com**