



**The League of Women Voters
of the Lima area
Membership Form**

Contact Information

Name: _____

Address: _____

City: _____ **State:** _____

Zip code: _____ **Phone:** _____

Email: _____

Please complete this form and send with your check payable to The LWV of the Lima Area. Dues: \$50 for an individual or \$70 for two people at an address. Make check payable to LWV of the Lima Area. Your membership in the State and National Leagues of Women Voters is included.

**Send to:
Catherine King, Treasurer
2969 Sands Road
Lima, OH 45805**



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