

**NEBRASKA ASSOCIATION OF COUNTY OFFICE EMPLOYEES**

**Membership Application**

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ County Office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service Beginning Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*please write legibly\*\***

**Please check your membership type:**

**Annual Due Amount**: **Annual Salary rounded to whole dollar X .0028**

\_\_\_\_\_ **Full Voting Members: County Office employee serving under permanent appointment**

**Annual Due Amount: $25 for any of the following:**

**\_\_\_\_\_ Associate Members: GS employee at the county level under permanent appointment**

**\_\_\_\_\_ Associate Members: Temporary FSA employee**

**\_\_\_\_\_ Associate Members: State Office employee**

**\_\_\_\_\_ Associate Members: County Committee Member**

Please send membership application and FSA-444 to:

Anne Rexroth, NEBRASCOE Sec/Treasurer – anne.rexroth@usda.gov

If you have questions or comments, please email:

Emiliee Seier, NEBRASCOE Membership Chair – emilee.seier@usda.gov