



**COUNTY SAFETY OFFICER'S  
ORGANIZATION OF CALIFORNIA**

**2011-2012 MEMBERSHIP INVOICE (July 2011 to June 2012)**

Federal Tax ID # 87-0786995

PLEASE REMIT YOUR COUNTY MEMBERSHIP FEE IN THE AMOUNT OF **\$200.00**

This is a membership Renewal  This is a new membership

Name and Title of Member: \_\_\_\_\_

County Name and Address \_\_\_\_\_

Phone & Fax Numbers: \_\_\_\_\_

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

Make checks payable to **"CSOOC Membership"**

Mail to: Tammy Frye, CSOOC Secretary/Treasurer  
Shasta County 1450 Court Street Room 348  
Redding, CA 96001  
Phone: 530-225-5143 Fax: 530-225-5251  
E-Mail: [tfrye@co.shast.ca.us](mailto:tfrye@co.shast.ca.us)

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**Please return this section with payment**

This is a membership Renewal  This is a new membership

Name and Title of Member: \_\_\_\_\_

County Name and Address \_\_\_\_\_

Phone & Fax Numbers: \_\_\_\_\_

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

I would like a receipt for payment.