



MEMBERSHIP DUES COLLECTION INSTRUCTIONS **for County Officers Submitting Membership Dues to CMAA**

Submitting State Membership Dues

Submitting state dues promptly ensures that our members receive their benefits soon after they join. Please forward state dues **MONTHLY** or **as soon as you receive a new member's dues regardless of how few you may have.** Indicate the batch number on the dues submission sheet. It is very important that all information for each member is **complete and correct, including email addresses.** Thank you for your prompt transmission of your CMAA collected dues.

The information that you provide is the same information which is stored in our database and in the CMA database and is used for future membership mailings including the *Newsline* and *E-News*. Once dues have been processed, confirmation will be sent by email.

STEP 1: Update Membership Dues Spreadsheets

The state office will email state and county treasurers or membership chairs an Excel file containing their membership roster from the previous year. Dues from new and renewing members should be entered in this spreadsheet, and any new or corrected contact information should be updated in the file. Please place an "x" in the 2013-2014 columns. Also, please leave the information on non-renewing members in place. Please make sure to enter the dues amount paid by each member.

State dues are:

\$30 for regular members and friends of medicine

\$15 for sustaining members

Courtesy for physicians-in-training and/or their spouses/partners

State dues optional for Past CMAA Presidents and CMAA Honorary Members

Help is available by contacting Colleen Mazj (zuzumazj@yahoo.com) or Tracy Liston (tracy.liston@gmail.com)

STEP 2: Complete the Membership Dues Submission Form

Dues submissions should be summarized on the attached Dues Submission Sheet.

Please be sure to send this sheet back to CMAA with your dues check and a list with full names and titles of members included in this batch.

STEP 3: Mail the following items to:

CMA Alliance, PO Box 12605, Bakersfield, CA 93389-2605

A list with full name and title of members included in this batch.

Completed Membership Dues Submission Sheet

Check **payable to CMA Alliance**

STEP 4: Email the following items to 1) Tracy Liston at tracy.liston@gmail.com; 2) Colleen Mazj at zuzumazj@yahoo.com and 3) Kathy Hughes at cmaakathy@gmail.com

Spreadsheet with your county's complete membership information in CMAA format.

- **Send AMAA dues directly to:**

AMA Alliance, 550M Ritchie Highway #271, Severna Park, MD 21146-2925