



## Rhode Island Association of School Business Officials

Name \_\_\_\_\_ Title \_\_\_\_\_

District/Organization \_\_\_\_\_

Primary Member \_\_\_\_\_ \$425

Secondary Member \_\_\_\_\_ \$225

Retired Member \_\_\_\_\_ \$60.00

Address \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax: \_\_\_\_\_

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

**Please complete the information request section and return with your payment  
by August 31, 2013.**

**Please note new mailing address for annual dues**

Dues checks should be made payable to:  
Rhode Island Association of School Business Officials  
PO Box 28303  
Providence, RI 02908