

**INLAND EMPIRE CHAPTER
ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
MEMBERSHIP APPLICATION**

Name: _____

Professional Certification(s): _____

Job Title: _____

Employer: _____

Type: Public Accounting Internal Audit Private Investigation Corp Security
 Legal Services Government Other _____

Street: _____

City: _____ State: _____ Zip _____

Phone: _____ Fax: _____

e-mail: _____

National Membership Status <input type="checkbox"/> CFE <input type="checkbox"/> Associate <input type="checkbox"/> None

I certify that the above is true and correct.

SIGNATURE: _____ **DATE:** _____

Inland Empire Chapter dues are for the 2019 calendar year. Membership is subject to approval by the Chapter Board of Directors. The information you provided in this application may be printed in the Inland Empire Chapter Directory. Annual dues for the Inland Empire Chapter do not include annual dues for the National Association. Call (800) 245-3321 in Austin, TX if you would like to join the National Association.

\$50 CHAPTER MEMBER: A Member is required to be a Certified Fraud Examiner (CFE) in good standing. A Member is eligible to vote and hold office in the Inland Empire Chapter.

\$50 CHAPTER ASSOCIATE: An Associate is required to be an associate member of the ACFE in good standing. An Associate is eligible to vote and hold office (except president) in the Chapter.

\$60 CHAPTER AFFILIATE: An Affiliate is **not** required to be a member of the National Association. An Affiliate Member is not eligible to vote, hold office, or participate on Chapter Committees.

\$25 STUDENT: For full-time undergraduate or graduate students of accounting, business administration, finance, law, or criminal justice

Please make your check payable to "IEACFE"

<p><i>Mail this application, your check and your business card to:</i> INLAND EMPIRE CHAPTER- ACFE ATTN: ANA RODRIGUEZ 2210 E. ROUTE 66 GLENORA, CA 91740</p>
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