



2005 CAMB Statewide Affiliate Membership January 1 to December 31.

Statewide Affiliate membership includes two (2) designated representatives within each CAMB chapter in addition to the primary contact at the company's headquarter office. Primary contact receives NAMB membership.

Primary Contact Member Information—Please provide both business and home address; check the box to indicate preferred mailing address.

Name _____ Title _____

Company _____

Business Address _____

City _____ State _____ ZIP+4 _____

Home Address _____

For grassroots legislative efforts—internal use only.

City _____ State _____ ZIP+4 _____

Phone _____ Fax _____

E-mail _____

Web site _____

Upon submission of this application, I hereby agree to act in accordance with the laws, rules, and regulations of the state of California, the federal government, and in accordance with the Code of Ethics, Standards of Practice, and bylaws of the California Association of Mortgage Brokers, and the National Association of Mortgage Brokers where applicable. Failure to do so may result in the termination of my membership without refund.

Applicant Signature: _____

Primary Contact's Chapter Classification - You may attend all chapters, but please select one as your designated chapter.

Northern California	Southern California
<input type="checkbox"/> Central Valley (CV)	<input type="checkbox"/> Central Coast (CC)
<input type="checkbox"/> Greater Monterey Bay (GMB)	<input type="checkbox"/> Inland Empire (IE)
<input type="checkbox"/> Greater Northstate (NS)	<input type="checkbox"/> Los Angeles County (LAC)
<input type="checkbox"/> Greater San Joaquin Area (SJ)	<input type="checkbox"/> Orange County (OC)
<input type="checkbox"/> Silicon Valley (SV)	<input type="checkbox"/> San Diego (SD)
<input type="checkbox"/> East Bay (EB)	<input type="checkbox"/> San Gabriel Valley (SGV)
<input type="checkbox"/> North Bay (NB)	<input type="checkbox"/> Southern Los Angeles County (SOLA)
<input type="checkbox"/> Greater Sacramento (SAC)	<input type="checkbox"/> Beverly Hills
<input type="checkbox"/> San Francisco Peninsula (SFP)	

Dues are payable on or before December 31, 2004

Please return original application with your payment and profile questionnaire (*on back of this form*) to CAMB's office.

Statewide Affiliate CAMB Membership Dues \$ 3,750

PAC Fund - You can make a voluntary nondeductible contribution to the CAMB PAC.
You must write a separate check or authorize a separate amount on your credit card.

State PAC (voluntary) Federal PAC (voluntary-personal checks only) \$ _____

Total Amount: \$ _____

For federal tax purposes dues or contributions to CAMB are not tax deductible as charitable contributions. A portion of membership dues may be deductible by members as an ordinary and necessary business expense. The nondeductible portion of dues, estimated to be 10 percent, is used by CAMB for lobbying purposes.

Method of Payment - Please make checks payable to CAMB.

Amount \$ _____ Check # _____ American Express MasterCard Visa

Name (as it appears on credit card) _____

Card No. _____ Exp. Date _____

Signature _____