#### **IVMA**

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For Office Use Only									
Check #: Date Received: CC: Yes \( \subseteq \text{No} \subseteq \)	/	/							

### Indiana Veterinary Medical Association

2016/2017 Professional New Graduate (2015 Graduate) Dues Statement Payment due by 6/30/2016										
Membership Valid From: 7/01/2016-6/30/2017										
Professional New Graduate (2015 Graduate) \$120										
If choosing monthly installments please provide a credit card number. Only CREDIT CARD PAYMENTS are allowed with this choice! You are then agreeing to 10 monthly payments for the provided amount.										
Visa Master Card Discover American Express Check										
Card Number:			Please consider making a donation to the following: (See other side for Mission Statements for Vet Med PAC & IAHF.)							
Exp. Date: CVV Code:			Indiana Animal H	O C & IAHF.)  O C Other C						
Print Name :				Foundation Contribution:   Veterinary Medicine PAC   (Political Action Committee):   \$25			Other 🗌			
Signature:				= \$ Total Amount Due						
Signature.				Dues + Donation						
Who pays your dues? You ☐ Other ☐				Please indicate your primary area of practice: Small Animal						
☐ I would like the IVM	IA Newsl	etter delivered b	y US Mai	il.						
First Name:								Yes No		
Last Name:								☐Yes ☐No		
Business Name:				Ī				☐Yes ☐No		
Mailing Address: (Work) Contact Phone:				City:		State:	Zip:	☐Yes ☐No		
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Email:								☐Yes ☐No		
Member Type:								☐Yes ☐No		
Work County:								☐Yes ☐No		
School:								☐Yes ☐No		
Graduation Year:								☐Yes ☐No		
Please update information if different from above or provide any information that is missing.										
First Name:					Last Name:					
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Mailing Address: (Work)					City:		State:	Zip:		
Contact Phone:										
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Home Address:					City:		State:	Zip:		
Email:										
Member Type:					Work County:					
School:					Graduation Year:					
The IVMA prints a membership directory twice annually. If you do not wish your information to be published in the directory please complete the following: You can publish: my home address only: work address only: both: neither: Do we have your permission to send you email or facsimile updates from the IVMA from time to time? Yes No										

### EXPLANATION OF DUES STATEMENT

### **Tax Information**

Please make checks payable to IVMA or use credit card and return in enclosed envelope. Payments and dues paid to the IVMA are not deductible for federal tax purposes as charitable contributions. They may be deductible as any ordinary and necessary business expense, except that portion of dues payments related to representation on legislative issues. The IVMA estimates the portion attributable to legislative advocacy to be 15% in 2016. Contributions to the Indiana Animal Health Foundation are deductible as charitable contributions for federal income tax purposes to the extent provided by law.

## **IVMA Mission** Statement



The Indiana Veterinary Medical Association (IVMA) promotes animal well-being, public health and advances in the profession and serves as a voice for veterinarians while advocating the highest standards and ethics. (March 10, 2010)

# **Indiana Animal Health Foundation Mission Statement**



Our goal is to advance animal and human health through education and support.

# **Veterinary Medicine Political Action Committee Mission Statement**



The Veterinary Medicine Political Action Committee (PAC) has been established to advance the strong veterinary medical profession's presence in the legislative arena in Indiana. The Vet Med PAC is responsible for raising funds which will be used to support candidates that encourage political philosophies consistent with advancing the veterinary medical profession and the science of veterinary medicine in Indiana. Your contribution to the Vet Med PAC will enable the positive message of the IVMA to spread amongst the members of Indiana's Legislature. Please consider supporting the Vet Med PAC today; your contribution is significant and it will allow our collective veterinary medicine voice to be heard.