

# NAPS AUXILIARY MEMBER INVITE

By joining, as a new member, you can directly support your **NAPS (National Association of Postal Supervisors)** member using your Auxiliary voice to assist in NAPS legislative initiatives. Auxiliary members also assist at local meetings and support and promote the Supervisor Political Action Committee (**SPAC**) providing financial support, through fund raising at conventions.

Each NAPS member, in good standing, is entitled to **one Auxiliary member** (over 16 years of age) who may be a **spouse, immediate family member or designated representative**. *(All Auxiliary dues are paid by the local branch.)*

|                    |  |
|--------------------|--|
| NAME _____         | NAPS MEMBER NAME _____                               |
| STREET _____       | _____ SPOUSE   |
| CITY/STATE _____   | _____ FAMILY MEMBER/ RELATIONSHIP _____              |
| ZIP CODE + 4 _____ | _____ DESIGNATED REPRESENTATIVE (Significant/Friend) |
| PHONE _____        | NAPS BRANCH # _____                                  |
| EMAIL _____        |  |

**NOTE:** Branch NAPS member, please return this completed form to the next local branch meeting or mail to:

Sherry Mattfield, 5016 – 53<sup>rd</sup> Ave. No., Crystal, MN 55429-3226 (763-486-6310) smatt1956@outlook.com

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