



**Association of Certified Fraud Examiners
Central Florida Chapter**

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NEW/RENEWAL MEMBERSHIP FORM

Please complete the following form and mail along with your annual dues to the address listed below

Name..... CFE yes ___no___

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Please contact our chapter via email with your questions, concerns, or inquiries by visiting our chapter's website listed on this form

Please mail your completed form along with your \$25 payment to:

**Paul Hawkins
P.O. Box 915754
Longwood, FL 32791**

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