



*A Chapter of the National Institute
of Governmental Purchasing*

IAPPO Member Data Form Update
(Please complete a form for each staff member)

Name: _____

Title: _____

Agency: _____

Department/Division: _____

Address 1: _____

Address 2: _____

City: _____ ST: _____

County: _____ Zip Code: _____

TX: _____ FX: _____

Email: _____ Dept. Website: _____

Nickname for Badges: _____ NIGP Member: Yes No

Current Certifications: CPPO CPPB C.P.M. A.P.P. Other: _____

I certify that the information provided herein is accurate as of the date shown below:

Signature: _____ Date: _____

Member Data Forms should be forwarded to:

Patti Huth, CPPO, CPPB
Email: phuth7@comcast.net