



Reno/Sparks Association of REALTORS®
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ELECTION TO OPT OUT OF E-BILLING

Name: _____ Member Number: _____

I **do not** wish to receive e-billing statements for monthly recurring and non-recurring invoices, or for annual dues billing. I understand that I will be billed \$10 annually to cover the cost of postage and handling incurred during the year in lieu of e-billing.

Signature

Date _____

My preferred mailing address is:

Street Address

City State Zip Code

**All correspondence from the Reno/Sparks Association of REALTORS®
will be sent to the address identified above.**