



MT Coroner's Association Annual Dues Form 2024

Member: County Coroner -\$200.00

Name _____ County _____
Address _____ City _____ Zip _____
Office Phone _____ Cell Phone _____
FAX _____ Email _____

Associate Members: Deputy Coroners \$35.00 each

Name _____ County _____
Address _____ City _____ Zip _____
Office Phone _____ Cell Phone _____
Email _____

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Dues Form: Send or Email to:

Montana Coroner's Association

200 W. Broadway St.

Missoula MT 59802

406coroners@gmail.com

Payment options:

Checks: Payable to

Montana Coroners' Association

200W. Broadway St

Missoula MT 59802

Credit Card Payment: NEW

Add 3.30% plus .10 cent manual entry fee (phone-call in)

Add 2.30% plus .10 cent convenience fee (card swipe at Convention)

Call: 406-531-0355

If your county requires a claim, please e-mail; 406coroners@gmail.com

Questions Call: 406-531-0355

Note:

We are trying to keep our Coroner Directory / Contact List current, please provide current e-mail and phone number for all Associate Members.

Please copy page 2 of this form for additional associate members