



**hfma™ georgia chapter**  
 healthcare financial management association

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TO: Georgia HFMA Members  
 FROM: Karen Newton  
 2011-2012 Chapter President  
 Georgia HFMA  
 SUBJECT: CALL FOR 2011-12 TEAMS (beginning in May 2011)

Georgia HFMA is one of the leading chapters within the National HFMA organization. Our success is because of the support of our Chapter volunteers. We welcome your involvement with our Chapter. Our committees are very important to our continued growth. Therefore, please select a committee that you will be able to afford the time to participate in that committee's responsibilities.

After reviewing this list, please make the commitment to volunteer for 2011-12 by completing the form below.

Fax the completed form to my attention at 1-678-718-2416 or email to [knewton@cahga.com](mailto:knewton@cahga.com)

Thank you in advance for agreeing to serve! I look forward to a successful year working with you in Georgia HFMA.

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 HFMA Member #: \_\_\_\_\_  
 Advanced Member  CHFP  HFMA

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_  
 Fax Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

Committee Preference: Please consider which committee can best benefit from your knowledge and experience.

1st Choice \_\_\_\_\_  
 2nd Choice \_\_\_\_\_  
 3rd Choice \_\_\_\_\_

Are you interested in serving as a Team Member or Team Chair/Co-chair?  
 Yes  No  If yes, which committee \_\_\_\_\_

What benefits are you looking for from the Georgia HFMA Chapter?  
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