

THE AMERICAN INSTITUTE OF ARCHITECTS

INSTRUCTIONS

Type or print all information carefully and sign with ink. Mail both copies to the Secretary of the local Chapter, with check for \$20.00 made payable to The American Institute of Architects.

Application for Corporate Membership

2.	I am a citizen of the Uni (If not a citizen, attach of The Board of Directors.)	ited States. Yes Xexplanation and justification	No_ n for possible w	aiving of citizens	ship requirement by
3.	My residence address is:	370 East Cor	onado		
	,	(NUMBER) Phoenix, Ari		(STREET)	
,	-	(CITY)	(COUNTY)	(STATE)	(ZIP CODE)
/ 4.	My business address is:	7 West Adams	Street		,
		(NUMBER), Phoenix, Ari		(STREET)	35003
		(CITY)	(COUNTY)	(STATE)	(ZIP CODE)
	(BUS	INESS) or (RESIDENCE)	•	icial Institute add	ress
5.		INESS) or (RESIDENCE)	-		ress Chapter, AIA
	I desire to be a member of I declare that I will come can Institute of Architect thereto; and that I under	of Central Ar	izona I the Standards of eto; and the Robilities, and obliga	f Professional Pra ules and Regula ations of a memb	Chapter, AIA actice of The Ameritions supplementary per of The Institute
6.	I desire to be a member of I declare that I will come can Institute of Architect thereto; and that I under	central Ar ply with the By-Laws and the duties, responsible understand all the information.	izona I the Standards of the Reposition, and the Reposition, and obligation contained	f Professional Pra ules and Regula ations of a memb in this form and	Chapter, AIA actice of The Ameritions supplementary per of The Institute

Pd \$20.00

See to Ilm

STATISTICS

March 8, 1931 Place of birth Peoria, Illinois 9. Date of birth_

10. I am registered or licensed to practice architecture in the following-named states; with year first registered in each:

ARIZONA 1962

EDUCATION

11. (a) I attended colleges and universities as follows:

NAME OF COLLEGE OR UNIVERSITY

LOCATION

NO. OF YEARS

YEAR OF GRADUATION

DEGREE

University of Illinois Urbana, Ill. 5-1/2

1957

Bachelor of Architecture .

(b) I have held the following scholarships or other honor awards, and have traveled in the followingnamed countries:

NONE

PROFESSIONAL TRAINING AND PRACTICE

12. I have been employed or in practice during the past three years as follows: (Note: Be sure to include current status of employment or practice.)

> EMPLOYER'S NAME AND ADDRESS

EMPLOYER'S BUSINESS

CLASSIFICATION OF POSITION

PERIOD OF EMPLOYMENT To

From

Lescher & Mahoney, Architects & Engineers Ltd. Jr. Partner

1957

1964

13. Are you engaged in any manner in building contracting? Explain

14. Is your employer engaged in any manner in building contracting? Explain Inapplicable.

BUSINESS AFFILIATIONS

15.	Do you	participate	or o	wn an ii	nterest in	any	business	which	could	prejudice	your	professional	judgment?
	Yes	No	X	(If '	yes, pleas	e ex	plain.)						

PRESENT OR PREVIOUS MEMBERSHIPS AND APPLICATIONS IN ARCHITECTURAL ORGANIZATIONS

16.	I have previously applied for membership or associateship in the					
			•			
17.	Member of Institute from	to	_			
18.	Professional Associate of	Chapter from	to			
19.	Associate of	Chapter from	to			
20.	Junior Associate of Central Arizona	Chapter from 1957	to 1959			
21.	Name of any other architectural organization of	of which you are a member No	one			

REFERENCES

Five references are required, at least three of whom shall be corporate members of The Institute in good standing. Member references must be available for personal contact by the local chapter officers.

Bennie M. Van Buren

Edward-La-Varney AIA	221 East Camelback Road		
Joseph K.* Brinig Frederick-PWeaver	234 N. Central Dark Road		
*MEMBER	ADDRESS		
Ralph Haver II , AIA	1133 J East Missouri Av.		
Leslie J. Mahoney ATA MEMBER OR OTHER REFERENCE	407 W. Osborn Rd.		
Thomas A. Jackson	7000 East Camelback Road-Scstsdale		
MEMBER OR OTHER REFERENCE	ADDRESS		

^{*} Type or print full names of references



RECORD OF REGISTRATION

THE AMERICAN INSTITUTE OF ARCHITECTS

	The Central	l Arizona Chapter	
		(Chapter)	
	2720_North_	16th Street, Phoenix, Arizona (Address)	. •
SECRETARY,			
BOARD OF ARC	HITECTURAL EXAMINE	ERS,	
Address 3550	N. Central, #408		
		James R. Deremiah	?
		(Name of Applicant)	,
Dear Sir:			
The above practicing in you		mbership in The American Institute of Architects is an architect	
To qualify architecture there		n applicant must be registered or licensed by the state to practice	
Institute in dete files.		ng questions relating to the applicant's registration, to assist The for membership? A duplicate of the form is enclosed for your Richard M. Arnold Chapter Secretary	
1. Is the applicant	registered or licensed to p	practice architecture in your state?Yes	
2. Was his registra	tion or licensing by examin	nation?Yesor by exemption?	
3. What was the so	•	Standard NCARB 36-hour written exam	
	period of the examination?	_4days. Written examination36hours; Oral examina-	
	, did applicant have a certi	tificate from the National Council of Architectural Registration Boards?	
6. Date of first reg	D 1 1	8 10 61 Registration No. 5038 Is it gurrent? Yes	Ą.
		(Signature of Secretary of Board) Executive Secretary Arizona State Board of Technical Registr	I.A. F. 10,000
		Executive Secretary Executive Secretary	orm H)—2-61
Date_Septembe	<u>er_919_66_</u>	Arizona State Board of Technical Registr	ation

(Name of Board)

October 3, 1966

Mr. James R. Beremiah, AIA 7 West Adams Street Phoenix. Arizona 85003

Dear Mr. Deremiah:

The Board of Directors of the American Institute of Architects takes pleasure in informing you that it has acted favorably on your application and welcomes you to corporate membership in the Institute.

In the near future, some literature concerning the Institute will be mailed to you together with a lapel emblem. In approximately two months you will receive a certificate of membership, either directly from the Institute or through formal presentation by your Chapter.

You are assigned to the Central Arizona Chapter and the Arizona Society of Architects of the ATA, effective October 3, 1966.

I sincerely hope that you will take an active and interested part in your Chapter's activities. The Chapter is the cornerstone of the Institute's strength where the policies which advance our profession are developed. Members who are active in Chapter affairs gain the most from AIA as professional men and provide the leadership which AIA needs to meet the challenges and opportunities which the future holds for architecture.

I want you to feel free to call on any of the Institute officials or staff members any time the need arises.

Sincerely yours,

Charles M. Nes, Jr., FAIA President 1

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(\$8.00 OF THESE DUES IS FOR YOUR JOURNAL SUBSCRIPTION.)

Telephone (202) 626-7325

THE AMERICAN INSTITUTE OF ARCHITECTS

DUES INVOICE - 1982

1735 NEW YORK AVENUE, N.W.

626-7322

(U) 11 Ħ 00.06 \$ X X \$160.00 ATTACHED, TOTAL DUES (SUPPLEMENTAL PLUS
REGULAR PAID THIS INVOICE)
THIS CONTRIBUTION TO THE AIA MINORITY SCHOLARSHIP FUND IS
VOLUNTARY. IF YOU DO NOT WISH TO CONTRIBUTE, DEDUCT \$3 FROM
THE AIA BOARD OF DIRECTORS HAS APPROVED THE USE OF THIS INVOICE
TO SOLICIT CHARITABLE CONTRIBUTIONS FOR THE AIA FOUNDATION'S
ENDOWMENT CAMPAIGN. A TAX-DEDUCTIBLE CONTRIBUTION OF \$10
ON MORE HELDS PRESENCE THE OCTAGON AND EXPAND THE AIA
FOUNDATION'S SERVICES TO THE PROFESSION TO CONTRIBUTE, PLEASE
ADD \$10 OR MORE TO THE TOTAL INVOICE BILLING. AIAF CONTRIBUTION SEE INFORMATION — REVERSE SIDE ON THE NUMBER OF REGISTERED ARCHITECTS IN FIRM (BOTH EMPLOYEES AND OWNERS) AS OF JANUARY 2, 1982. SUBTRACT: REGISTERED ARCHITECTS IN FIRM (BOTH EMPLOYEES AND OWNERS) WHO ARE MEMBERS OF AIA AS OF JANUARY 2ND. ATTACH LIST OF THESE MEMBERS TO QUALIFY FOR THIS CREDIT. AMOUNT UNPAID TOTAL SUPPLEMENTAL DUES 133.00 SUPPLEMENTAL DUES COMPUTATION: DUE AS INVOICED LIABLE. AMOUNT PAID ္မ TOTAL INVOICE RESTCRATION, PAY THE AMOUNT YOUR SUPPLEMENTAL DUES, IF 133.00 * VIV DUES INQUIRY. SUPPLEMENTAL DUES MUST BE PAID ON THE TOTAL NUMBER OF REGISTERED ARCHITECTS IN THE FIRM EVEN THOUGH ALL OWNERS IN THE FIRM MAY NOT BE MEMBERS OF AIA. PLEASE CHECK THE APPROPRIATE BOX, SIGN WHERE INDICATED AND MAIL TO AIA WITH PAYMENT. 3.00 I HAVE NO OWNERSHIP OR MANAGERIAL POSITION IN A FIRM AND AM NOT LIABLE FOR SUPPLEMENTAL DUES. I HAVE OWNERSHIP OR MANAGERIAL POSITION IN A FIRM AND SUPPLEMENTAL DUES ARE SUBMITTED HEREWITH. I HAVE OWNERSHIP OR MANAGERIAL POSITION IN A FIRM AND MY SUPPLEMENTAL DUES HAVE BEEN PAID UNDER THE NAME OF: SCHOLARSHIP EVERY MEMBER OF AIA MUST RESPOND TO THIS SUPPLEMENTA 85016 REGULAR DUES 130.00 WASHINGTON, D.C. 20006 FOR NEWBERSHIP COMPUTE AND PAY INVOICE DATE | MEMBER NO. 184660 REGULAR DUES SUPPLEMENTAL DUES DERENIAH, 4105 N 20 PHCENIX 3/31/82 119510