

Summary of Application and Dues

Membership Number: \_\_\_\_\_  
 Name and Address: Cannon, Harry D.  
5505 N. Brookling, #607  
Oklahoma City, Oklahoma 73112

\* Membership Type: Corporate

Address Format: ----- 1

\* Region Name: Central States

\* Sex: Male

\* Chapter Name: Oklahoma Chapter and Oklahoma Council of Archi-

\* Election Date: March 11, 1975 tects

Qualification Code: \_\_\_\_\_

Qualification Key: \_\_\_\_\_

\* Qualification Source: 1

\* Qualification Job: 500

Subscription Mail Code ----- 0

Subscription Type Code ----- 7

Subscription Firm ----- 12

Subscription Order Code ----- 001

\* Amount of Dues and Fee Attached: \$40

Personal Check \_\_\_\_\_ Other

If other, give name: Hudgins, Thompson, Ball & Associates

Other members included with check: \_\_\_\_\_

\*\* Regular Dues Billed: \_\_\_\_\_

\*\* Regular Dues Paid: \_\_\_\_\_

Regular Dues Rate Code: \_\_\_\_\_

\* Social Security No.: \_\_\_\_\_

	Account No.	* Amount
Admission Fee _____	#304-000-000	\$10
Readmission Fee _____	#302-000-000	
Current Year's Regular Dues _____	#301-000-000	\$30
Current Associate Dues _____	#316-000-000	
Prior Year's Regular Dues _____	#302-000-000	
Deferred Regular Dues _____	#239-000-000	
Deferred Associate Dues _____	#238-000-000	
Current Year's Supplemental Dues _____	#311-000-000	
Prior Year's Supplemental Dues _____	#312-000-000	
Other _____		

Remarks: \_\_\_\_\_ Total Remittance \$40

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Harry

Application No.

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document H301

Application for Corporate Membership

See Part 3, Instruction Sheet, for current dues and instructions.



1. My full name is HARRY D. CANNON

2. My legal residence is 5505 N. BROOKLINE, #607  
Address  
OKLA. CITY, OKLA., OKLA., 73112  
City County State Zip

3. My business firm and address are HUDGINS, THOMPSON, BALL & ASSOC.  
Name Address  
1411 CLASSEN BLVD., OKLA. CITY, OKLA., OKLA. 73106  
City County State Zip

Please use my RESIDENCE address as my mailing address  
(business) or (residence)

4. I desire to be a member of OKLAHOMA Chapter, AIA.

5. I declare that I will comply with the Standards of Ethical Practice of the AIA, which are attached hereto; and the Bylaws; and the Rules and Regulations supplementary thereto; and that I understand the duties, responsibilities, and obligations of a member of the AIA; and that I have read and understand all the information contained in this form and its attachment.

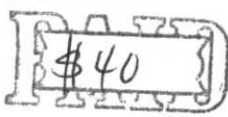
6. I am not indebted to the AIA or to any of its component organizations.

7. I enclose my check for the admission fee and the first year's annual dues, of which \$4.00 is for a year's subscription to the JOURNAL of the AIA. It is my understanding that if I am not admitted to membership, the dues will be returned to me, and the admission fee retained by the AIA as an examination fee.

Date JAN. 6, 1975

Harry D. Cannon  
(Applicant's signature, in ink)

MAR 5 1975



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BACKGROUND

8. Date of birth OCT. 31, 1935 9. Place of birth SEMINOLE, OKLA.
10. I am licensed to practice architecture in the following states, with the year first registered in each: (Attach evidence that license is current in one state; see instruction sheet.)

OKLAHOMA, 1965 (#776)

EDUCATION

11. I attended colleges and universities as follows:

Name	Location	No. of Years	Year of Graduation	Degree
UNIV. OF OKLA.	NORMAN, OK.	5	1958	B. ARCH.

PROFESSIONAL TRAINING AND PRACTICE

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

Employer's Name and Address	Employer's Business	Position	Period of Employment	
			From	To
HUDGINS, THOMPSON, BALL & ASSOC.	A/E.	PROJECT ARCHITECT	SEPT. '71	PRESENT

13. As related to my present employment, I am an employee in a firm or corporation  owner or part owner in a firm  corporation officer or board member  faculty member  public official  governmental employee .



BUSINESS AFFILIATIONS

14. Do you participate or own an interest in any business which could prejudice your professional judgment? Yes  No  (If yes, please explain.)

MEMBERSHIPS AND APPLICATIONS IN ARCHITECTURAL ORGANIZATIONS

15. I have previously been a corporate member of the AIA: Yes  No  (If yes, please explain.)

16. I have previously been an associate of an AIA Chapter: Yes  No  (If yes, please explain.)

CURRENT PROFESS. ASSOC. MEMBER OF OKLA. CHAPTER.

17. I have previously been rejected for corporate membership or for chapter associateship: Yes  No  (If yes, please explain.)

18. Other architectural organizations in which you hold membership

NONE

REFERENCES

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

\* Type or print full names of references.

<u>RALPH BALL</u>	AIA	<u>1411 CLASSEN ; OK. CITY</u>
* Member		Address
<u>ED HUDGINS</u>	AIA	<u>1411 CLASSEN ; OK. CITY</u>
* Member		Address
<u>DOMBY ZINN</u>	AIA	<u>1411 CLASSEN ; OK. CITY</u>
* Member		Address
<u>GENE CUNNINGHAM</u>		<u>1411 CLASSEN ; OK. CITY</u>
<u>BETTY JACKSON</u>		<u>1411 CLASSEN ; OK. CITY</u>

OPTIONAL INFORMATION

Please complete the following if you wish:

20. I have been awarded the following scholarships or other honor awards:

[Handwritten scribble]

21. I have traveled in the following countries:

[Handwritten scribble]

22. Marital Status: Single  Married . If married, please give wife's name for information of chapter's women's auxiliary

[Handwritten scribble]

23. Hobbies:

[Handwritten scribble]

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THIS IS TO CERTIFY THAT

Harry D. Cannon

HAS BEEN GRANTED  
LICENSE NO. 776 AND IS  
ENTITLED TO PRACTICE  
ARCHITECTURE IN THE

**STATE OF OKLAHOMA**

FOR THE YEAR ENDING JULY 1st 1975  
STATE BOARD OF GOVERNORS

  
SECRETARY-TREAS.

  
PRESIDENT

Signature of Licensee







## THE AMERICAN INSTITUTE OF ARCHITECTS

March 11, 1975

Mr. Harry D. Cannon, AIA  
5505 North Brookline, #607  
Oklahoma City, Oklahoma 73112

Dear Mr. Cannon:

The Board of Directors of The American Institute of Architects takes pleasure in informing you of favorable action on your application and welcomes you to corporate membership in The Institute.

You will soon receive some literature about The Institute and a lapel emblem. In approximately one month, you will receive a certificate of membership, either directly from The Institute or through formal presentation by your Chapter.

You are assigned to the Oklahoma Chapter and Oklahoma Council of Architects of the AIA, effective March 11, 1975.

I sincerely hope that you will take an active part in your Chapter and its professional development and community improvement activities. Many of the policies and programs which advance our profession are developed in this way. Such activities give you, as a professional, the opportunity to develop leadership capabilities and to help the AIA meet the challenges and opportunities which the future holds for the architectural profession.

William L. Slayton, Executive Vice President of the Institute, joins with the Board and me in extending congratulations and best wishes for success. Please feel free to call on any of us, or the Chapter or Institute officers and staff, at any time the need arises.

Sincerely yours,

William Marshall, Jr., FAIA  
President

cc: Oklahoma Chapter, AIA  
Oklahoma Council of Architects, AIA



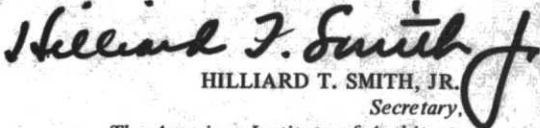
*The American Institute of Architects • 1735 New York Avenue, N.W. • Washington, D.C. 20006*

## NOTICE OF TERMINATION OF MEMBERSHIP

EFFECTIVE DATE: 10/31/76 For non-response to Regular Dues \$45.00 and/or Supplemental Dues ONES

This notice has been delayed in the hope that you would respond to the Notice of Impending Termination which was forwarded to you approximately sixty days ago. Since there was no reply to this final request for dues payment, we are compelled to terminate your membership in The American Institute of Architects, effective this date.

Sincerely,

  
HILLIARD T. SMITH, JR.  
Secretary,

*The American Institute of Architects*

110980-1  
CANNON, H D  
1411 STATE ST  
SEMINOLE

126

OK 74868

*(Copy to State and Chapter organizations)*