



The American Institute of Architects
APPLICATION FOR MEMBERSHIP

APPLICATION NO AP11485

Dated December 14, 1955.

Received February 21, 1956.

Granted March 20, 1956.

MEMBERSHIP NO 11485

- A Name of applicant James Earl Warner, Jr. Chapter Georgia
- B Address of applicant 4161 Parkridge Drive, N. E., Atlanta 19, Georgia
- C Application received with check for \$ 20.00 on February 21, 19 56.
- D Application returned for correction 19 .
- E Application in due order on March 4, 19 56. ✓ JHS
- F Acknowledgments to applicant and chapter on February 21, 19 56
- G Certified resolution of chapter executive committee recommending admission
~~on the application received~~ received on February 21, 19 56.
- H Record of registration, Form S39, Sent Ga. Feb. 21, 19 56 Received. March 4, 19 56.
- I The applicant has - been examined as to his professional qualifications by Georgia State Board
for the Examination of Architects.
- J The applicant is - currently registered as an architect or licensed to practice
architecture in the states of Georgia.
- K Application sent to The Board of Examiners on March 14, 19 56.
- L The Board of Examiners reported on application on March 14, 19 56.
- M The applicant was requested to furnish additional evidence of his profes-
sional qualifications on or before 19 , which was received.

REPORT:

As a result of its findings on the evidence submitted The Board of Examiners unanimously reports that in its opinion the applicant is* qualified for membership in The American Institute of Architects.**

Date March 14, 19 56

THE BOARD OF EXAMINERS
[Signature]
[Signature]
[Signature]
Chairman

CERTIFICATION OF ELECTION AND ASSIGNMENT

I, Secretary of The American Institute of Architects, hereby certify that, under authority vested in me by The Board of Directors, I have this day duly elected

James Earl Warner, Jr.
to membership in The Institute, and hereby declare him to be a corporate member of The Institute and assign him to membership in the Georgia Chapter.

Date March 20, 19 56

[Signature]
Secretary

- N Applicant was admitted on March 20, 19 56
- O Notice to applicant and notice of assignment to chapter on March 20, 19 56
- P Notice of denial of application to chapter and applicant and \$
returned to applicant on 19 .

INSTRUCTIONS

Type in all information carefully and sign with ink.

Mail both copies to the secretary of the local Chapter of The Institute, with check for \$20.00 made payable to The American Institute of Architects.



The American Institute of Architects

APPLICATION FOR CORPORATE MEMBERSHIP

I, the undersigned, do hereby apply for corporate membership in The American Institute of Architects.

1. My full name is JAMES EARL WARNER, JR.
2. I am a natural citizen of the United States.
3. My legal residence is in the City of Chamblee
County of DeKalb State of Georgia
4. My address in The Institute records will be
4161 Parkridge Drive, N.E.
Number Street
Atlanta 19, Georgia City Zone State
5. I am engaged in the profession of architecture as practicing Architect
6. I desire to be a member of the Georgia Chapter.
7. I declare that I will comply with the By-laws; and the Standards of Professional Practice of The American Institute of Architects, which are attached hereto; and the Rules and Regulations supplementary thereto; and that I understand the duties, responsibilities, and obligations of a member of The Institute; and that I have read and understand all the information contained in this form and its attachments.
8. I have filed the duplicate of this application with the secretary of the Chapter above named. I am not indebted to The Institute or to any of its component organizations.
9. I enclose my check for \$20.00, for admission fee and the first year's annual dues, of which \$1.00 is for a year's subscription to the *Bulletin of The American Institute of Architects*. It is my understanding that if I am not admitted to membership \$15.00 will be returned to me, and \$5.00 retained by The Institute as an examination fee.

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State whether natural or a naturalized citizen.

State whether residence or office address.

State whether a practicing architect, teacher, a public official, etc.

Date December 14, 1955

James Earl Warner, Jr.
Applicant sign full name in ink

20 2.28.56

STATISTICS

10. Date of birth October 31, 1923 Place of birth Gantt's Quarry, Alabama

11.(a) I am registered or licensed to practice architecture in the following-named states:
Georgia

(b) I passed the State Board Examination in the following-named states:
Georgia

(c) I hold Certificate No. of the National Council of Architectural Registration Boards,
for having passed their Standard Examination.

EDUCATION

12.(a) I attended high schools, private schools, colleges, universities, as follows:

<i>Name of School, College, University</i>	<i>Location</i>	<i>No. of Years</i>	<i>Year of Graduation</i>	<i>Degree</i>
Phillip's High School	Birmingham, Alabama	4	1941	
Georgia Inst. of Tech.	Atlanta, Georgia	4	1950	B.S.

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

PROFESSIONAL TRAINING *

13. I list below, in chronological order, the periods of my training as draftsman, the names and addresses of my principal employers, and my classification as draftsman while employed by each:

	<i>From</i>	<i>To</i>	
Smith & Hobbs, 931 Peachtree, Atlanta	DEC '49	MAR '51	Draftsman
Abreu & Robeson, Brunswick, Georgia	MAR '51	SEP '52	Draftsman
Cormac McGarvey, Brunswick, Georgia	SEP '52	DEC '52	Draftsman
Military Service	DEC '52	DEC '54	
Carol M. Smith & Assoc., Inc. 931 Peachtree St., N.E., Atlanta	JAN '55	present	Draftsman, Designer

* (NOTE: Applications received after July 1, 1953, must conclusively show that applicant has had three full years of experience in architectural work, in offices, governmental employment, or teaching, in addition to graduation from an architectural school; or eight full years of such experience without formal education; or equivalent combinations of both of the foregoing.)

PROFESSIONAL PRACTICE

14. I list below, in chronological order, the periods during which and the states in which I have practiced architecture as an individual or as a member of a firm or corporation or as a public official or have taught architecture or the arts and sciences allied therewith. (State names of firms or corporations or public office and of schools or colleges.)

From

To

15. Is architecture your principal vocation?

Yes

BUSINESS AFFILIATIONS

16. I list below other business in which I participate or own an interest, and the extent of such participation or interest.

None

PRESENT OR PREVIOUS MEMBERSHIPS IN ARCHITECTURAL ORGANIZATIONS

17. Member of Institute from _____ to _____
18. Junior of Institute from _____ to _____
19. Associate of _____ Chapter from _____ to _____
20. Junior Associate of _____ Chapter from _____ to _____
21. Student Associate of _____ Chapter from _____ to _____
22. Member of State Organization in _____ from _____ to _____

REFERENCES

Five references are required, at least three of whom shall be corporate members of The Institute in good standing.

<u>Matt L. Jorgensen</u> <i>Member</i>	<u>141 Walton St., N.W., Atlanta, Georgia</u> <i>Address</i>
<u>Francis L. Abreu</u> <i>Member</i>	<u>141 Walton St., N.W., Atlanta, Georgia</u> <i>Address</i>
<u>Carol M. Smith</u> <i>Member</i>	<u>931 Peachtree St., N.E., Atlanta, Georgia</u> <i>Address</i>
<u>Frederick O. Branch</u> <i>Reference</i>	<u>1722 Peachtree St., N.W., Atlanta, Georgia</u> <i>Address</i>
<u>Warren F. Penney</u> <i>Reference</i>	<u>3201 Peachtree Rd., N.E., Atlanta, Georgia</u> <i>Address</i>



THE AMERICAN INSTITUTE OF ARCHITECTS
THE OCTAGON, WASHINGTON, D. C.
Office of The Secretary

RECORD OF REGISTRATION
OF

James Earl Warner, Jr. - Atlanta 19, Georgia
(Name of Applicant)

SECRETARY,
BOARD OF ARCHITECTURAL EXAMINERS,
Atlanta, Georgia
Address

Dear Sir:

The above named applicant for membership in The American Institute of Architects is an architect practicing in your state.

To qualify for such membership, an applicant, must be registered or licensed by the state to practice architecture therein.

Will you please answer the following questions relating to the applicant's registration, to assist The Institute in determining his eligibility for membership? A duplicate of the form is enclosed for your files.

Date February 21, 1956

Edward L. Wilson
Secretary

1. Is the applicant registered or licensed to practice architecture in your state? Yes
2. Was his registration or licensing by examination? Yes or by exemption?
3. What was the scope of the examination? N. C. A. R. B. outline
4. What was the period of the examination? 5 days. Written examination 36 hours; Oral examination hours.
5. When examined, did applicant have a certificate from the National Council of Architectural Registration Boards? If so, give Certificate No.
6. Date of first registration Dec. 2, 1955 Registration No. 998 Is it current? Yes

C. L. Clifton
(Signature of Secretary of Board)

Date March 1, 1956 Georgia State Board for the Examination of Architects
(Name of Board)

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THE AMERICAN INSTITUTE OF ARCHITECTS
THE OCTAGON, WASHINGTON, D. C.

COPY

March 20, 1956

Mr. James Earl Warner, Jr.
4161 Parkridge Drive, N. E.
Atlanta 19, Georgia

Dear Mr. Warner:

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. You will receive shortly a certificate of membership duly executed by the officers of The Institute.

You are assigned to the Georgia Chapter effective March 20, 1956.

I sincerely hope that you will take an active and interested part in your chapter activities since it is through these activities that Institute policies are developed. Your cooperation and participation will contribute to the advancement of Institute objectives and increase the benefits to be derived from Institute membership.

I want you to know that my office is always at your service to the fullest extent of its powers.

Sincerely yours,

Edward L. Wilson
Secretary

Enclosures



THE AMERICAN INSTITUTE OF ARCHITECTS

JAN 19 1994

Source Code IRPD93
Please check one:
New member
Former member (also complete shaded area)
Advancing to Architect
Advancing to Emeritus M60587

1993 Application For Membership

RECEIVED

FEB 28 1994

AIA MEMBERSHIP SERVICES

8196305 (F)

MR. JAMES E. WARNER, JR.
411 PINETREE DR NE
ATLANTA GEORGIA 30305
404/261-4051
RETIRED

Position in organization (check one):

- Architect, Engineer, Designer, Draftsperson, Technical staff, Owner/executive/manager, Other

Career Information

Please check ONE category to indicate your primary professional field of employment.

- Architecture/A/E firm/private practice, Consulting engineering firm/private practice, Design firm, Interior design firm, Landscape design firm, Other design firm, Contractor or builder, Government employee, Corporate employee, University personnel, Student, Public library/professional society, Other

Membership Category And Dues

- ARCHITECT, INTERN, PRACTICING ASSOCIATE, ACADEMIC ASSOCIATE, DEGREED ASSOCIATE, INTERNATIONAL ASSOCIATE, EMERITUS
Check one: Pay \$45, which includes mail; Pay no dues and receive no mail; Pay a one-time amount of \$500 for lifetime membership

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**Reinstating
Members Only**



AIA Georgia
SUPPLEMENTAL DUES INFORMATION

An Association of the American Institute of Architects
Each reinstating architect member who is an owner or manager in an organization using architects to perform services for the public is responsible for supplemental dues. They must be submitted with your individual dues at the time of reinstatement.

Please check the appropriate box and include payment for the total amount of dues that applies:

- I am a sole proprietor with no other architects working for me. I have enclosed \$73 in addition to my individual dues of \$160.
- I own or manage a firm performing services for the public and am responsible for submitting supplemental dues for the firm. Payment calculation:

Number of AIA-member architects employed (including yourself) _____ x \$ 73 = \$ _____

Number of non-AIA-member architects employed _____ x \$177 = \$ _____

Total = \$ _____ is your supplemental dues

Please include the names of the AIA member architects (attach a separate sheet if additional space is required).

Member Name and ID Number _____

Member Name and ID Number _____

- I own or manage a firm using architects to perform services for the public, but our supplemental dues are paid by _____ (name and ID number).
- I neither own nor manage a firm and am exempt from supplemental dues.

Declaration

List two architect members in good standing who may be contacted by the local chapter for reference (not required for reinstating, advancing, or international members).

_____ Name	_____ Phone	_____ Chapter
_____ Name	_____ Phone	_____ Chapter

I declare that the above information is accurate and complete. I understand that as a member I will be subject to the duties, obligations, and responsibilities set forth in the relevant portions of the AIA Bylaws, Rules of the Board, Code of Ethics and Professional Conduct, and policies of the Institute.

I enclose my check(s) for the first year's national dues, \$30 of which covers a one-year subscription to *Architecture* magazine, together with payment for supplemental dues, state dues, and local dues as applicable. I understand that if I am not admitted to membership, the dues will be refunded to me.

Member Signature *James Warner* _____
Date *2/14/94*

call per phone 2/14/94

Return completed application to your chapter together with enclosures and payment.

**Chapter
Use**

Date completed application and dues received at chapter _____
(This is the applicant's official join date.)

- Chapter review found applicant eligible.
- Chapter review found applicant ineligible. Please state reason here or on a separate page and forward to the AIA secretary.

Signature and Date _____

Chapter should return all completed applications to:

AIA Membership Applications
P.O. Box 80363
Baltimore, MD 21280-0363.
Colony Square Mall
1197 Peachtree Street, N.E.
Atlanta, Georgia 30309-3520
(404) 873-3207
FAX (404) 875-7312

THE AMERICAN INSTITUTE OF ARCHITECTS



March 1, 1994

James E. Warner, Jr, AIA
Member #: 8196305
411 Pinetree Dr NE
Atlanta, GA 30305

Dear Mr. Warner:

It is a pleasure to inform you that your membership classification has been changed to Member Emeritus.

We are grateful for your many years of support, and we hope that your participation and interest will continue.

Sincerely,

A handwritten signature in black ink, appearing to read "Virgil R. Carter".

Virgil R. Carter, FAIA
Group Vice President, Membership

cc: AIA Atlanta
AIA Georgia