



AIA
Virginia

2501 Monument Avenue, Richmond, VA 23220

Ph: 804-237-1763 Fax: 804-643-4607 Email: cguske@aiava.org

2018 Supplemental Firm Dues Invoice and Worksheet

Return this form by mail, fax, or email to AIA Virginia

Firm: _____
Address: _____
City, State, Zip: _____
Phone: _____
Contact & Email: _____

I. Supplemental Firm Dues: All Architect Members must check one (select 1, 2, 3, or 4) of the following:

1. ____ I neither own nor manage an architecture firm with an office in Virginia. I am not a sole proprietor of an architectural practice. Hence, I owe no Supplemental Firm Dues.
2. ____ I am an owner/partner / principal of an architecture firm with an office in Virginia. The following Architect Member has been designated to be responsible for reporting and paying the mandatory Supplemental Firm Dues. _____

Architect Member responsible for Supplemental Firm Dues

3. ____ I am a sole proprietor. **Continue to Part II (Dues Liability Calculation) and Part III (Employee Detail).**
4. ____ I am an owner/partner /managing principal of an architecture firm with an office in Virginia and I am the person designated to report and pay the Supplemental Firm Dues. **Continue to Part II (Dues Liability Calculation) and Part III (Employee Detail).**

II. Dues Liability Calculation: If you checked Line 3 or 4 above, complete Part II to calculate your Supplemental Firm Dues based on the Employee Detail provided in Part III.

	<u># Employees</u>		<u>Amount</u>		<u>Subtotal</u>
A. AIA Member Architects (<i>You must include yourself</i>)	_____	X	<u>\$0</u>	=	\$ <u>0</u>
B. Non-AIA Member Architects	_____	X	<u>\$334</u>	=	\$ _____
C. AIA Associate Members	_____	X	<u>\$0</u>	=	\$ <u>0</u>
D. Other Architectural Employees	_____	X	<u>\$206</u>	=	\$ _____

Total Supplemental Firm Dues \$ _____

Payment Information: ☐ Check made payable to AIA Virginia ☐ MasterCard ☐ Visa ☐ American Express

Card Number _____ Security Code _____
Name on the Card _____ Expiration Date _____
Signature _____



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Note: Employee Detail as of January 1, 2017.

III. Employee Detail: Complete Part III by filling in the names of the employees accounted for in Part II (Dues Liability Calculation).

Employee Names	Licensed Architect AIA Member	Licensed Architect NON-AIA Member	Associate AIA Member	Other Architectural Employees (see definition below)
(Your Name Here)				
ATTACH ADDITIONAL SHEETS AS NECESSARY				
Total Number (Report on front page):				

Other Architectural Employees - examples - draftspersons, specification writers, project managers, field administrators, architectural historians, and other technical personnel working directly in support of generating architectural revenue - this does not include secretarial, clerical, emeritus members, part time employees, and other non-technical personnel