

Mail application and check to:

Iowa-Nebraska Chapter IASIU - Membership Application

Regular Melliber	~ \$30 Associate Member ~ \$20 Supporting Partner ~ \$30
Name	
Job Title	
Employer	
Address	(Charat Address /DO Day)
	(Street Address/PO Box)
	(City, State, Zip)
Work Phone	
Work Fax	
Email Address Employer Descrip	otion:
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Employer Descriptions and agree to be bound the ect to acceptance and verification, my membership in the lowa-Neiger Ship in t	Self-Insured Corp NICB Law Enforcement Fraud Bureau Law Firm ies: b Property Casualty Marine Life Health Internal Investigations Other (please describe) asors Name (required for Supporting Partner) whose ship in the lowa-Nebraska Chapter International Association of Special Investigation Units in accordance prewith. All of the information contained in this application is warranted by me to be true. I understand this application by the Board of Directors. I understand that if my employment duties change so to fall outside the required in this organization will terminate. The International Association of Special Investigation Units is required for Regular and Association Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regular and Association of Special Investigation Units is required for Regu

Iowa-Nebraska Chapter IASIU

Boys Town, NE 68010

PO Box 304

Iowa-Nebraska Chapter IASIU - Membership Categories

Regular Membership ~ \$30

- 1. Insurance company employees primarily engaged full time in investigation and/or supervision of investigations of insurance fraud.
- 2. An employee of a self-insured corporation who is employed and assigned to a special investigation unit and primarily engaged full time in the investigation and/or supervision of investigations of insurance fraud. The individual and organization must be actively engaged in anti-fraud activities and must be in conformance with the goals and objective of the IA-NE IASIU.
- 3. Any special agent or supervising special agent of the National Insurance Crime Bureau (NICB).

Associate Membership ~ \$20

- 1. Any local, state or federal law enforcement officer or prosecutor who is involved in, or provides special expertise or services for the investigation and/or prosecution of insurance fraud crime.
- 2. A full time investigator or investigations supervisor of a state insurance fraud bureau.
- 3. Any employee of an insurance company or any employee of a government agency who is involved in or provides special expertise or services for the investigation of insurance fraud.
- 4. Retiree Associate. Regular and Associate members that retire and are not currently employed in the insurance industry or in a capacity ineligible for membership, are eligible to continue membership as an Associate member.
- 5. Third Party Administrator (TPA)/General Agency Associate. Employees of a TPA or General Agency who are involved in, or provide special expertise or services for the investigation of insurance fraud.

Supporting Partner ~ \$30

1. Any attorney or employee of an attorney who provides special expertise or services (*legal advice*) to insurers, prosecutors or governmental agencies for the investigation of insurance fraud.

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#### **Limitations & Restrictions:**

- A. All Regular and Associate members of IA-NE IASIU must be members of and maintain membership in IASIU with the exception of law enforcement and fire personnel.
- B. All individual applicants must be at least twenty-one (21) years of age at the time of the application for membership.
- C. No person shall be eligible for any class of membership if he/she has been a member, is presently a member, or becomes a member of any corporation, firm, business, or association whose objectives and operations are deemed by its current members as inconsistent with the purposes and objectives of IA-NE IASIU.

<sup>\*</sup> Please request a copy of the IA-NE IASIU Bylaws to see additional Limitations & Restrictions