



Academy of Psychological Clinical Science

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Cindy Yee-Bradbury

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September 12, 2021

Dear Academy Representative:

I am writing to request payment of the annual dues for **2021** for your program's membership in the Academy of Psychological Clinical Science. The dues are **\$450.00** per year, and this is your invoice for that amount.

Your program may have already made a dues payment during 2021, but those dues were belated dues from 2020 due to complications from the COVID-19 pandemic. This invoice is for dues all member programs currently owe.

Please log on to our website at

<https://www.acadpsychclinicalscience.org/for-program-reps.html>

to pay the dues. Remember to note the name of your program when you make the payment. If you are unable to pay electronically with a credit card, please mail your check to the following address:

Nicholas R. Eaton, Ph.D.
2 N 6th Pl
Apt 23E
Brooklyn, NY 11249

I am using my personal address, because it is unclear how campus mail and in-person visits to my campus will function in the months ahead.

The Academy's Employer Identification Number is **39-1891962**, which your business office may require before payment.

Thank you for your membership in the Academy and for your prompt attention to this request. If you have any questions, please contact me by e-mail at nicholas.eaton@stonybrook.edu.

Cordially,

Nicholas R. Eaton, Ph.D.
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Director of Clinical Training
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