2015 LOEX Pre-Conference Payment

Tax ID: 90-0971299

--This is **not** a registration form; it is only for payment--Date: Institution: Name(s): TOTAL (number of attendees x \$115) Payment information (check one) Check Make checks payable to LOEX, and mail to LOEX at the address below. ☐ Credit Card Credit card payments can mailed to the address below, faxed (734.561.4527) or phoned in (734.487.2633) Visa _____ Mastercard _____ Name on card _____ Card # _____-__-Expiration ____/__ 3-digit Security Code _____ Billing ZIP Code _____ Payment is due April 17, 2015; the last day to request a refund is April 24, 2015.

LOEX

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