

2019 LOEX 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 \$310) \$ _____
[for Members or Presenters]

TOTAL (number of attendees x \$355) \$ _____
[for Nonmembers]

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 (734.340.2653)

Visa _____ Mastercard _____

Name on card _____

Card # _____ - _____ - _____ - _____

Expiration ____/____ 3-digit Security Code _____ Billing ZIP Code _____

Payment is due April 8, 2019; the last day to request a refund is April 19, 2019.

LOEX
4007 Carpenter Rd #357
Ypsilanti, Michigan 48197
<http://www.loex.org/>
contact@loex.org