2020 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 \$300) [for Members or Presenters] TOTAL (number of attendees x \$345) [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 6, 2020; the last day to request a refund is April 20, 2020.

LOEX

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