



INVOICE

An affiliate of
Indiana Association of Cities & Towns

INDIANA MAYORS' ASSISTANTS (IMA) 2015 DUES INVOICE

Indiana Mayors Assistants (IMA) 2015 Membership Total Due: \$50.00/per member

Please fill out member information for the IMA roster. (Copy form for additional members)

Name: _____
Municipality: _____
Position: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone _____ Number: _____
Fax Number: _____
Email Address: _____

Please return a copy of invoice with your dues by March 31, 2015 to
Indiana Association of Cities & Towns
Attn: IMA
125 W Market Street, Suite 240
Indianapolis, IN 46204

Paying by:

Check
(make payable to IACT)

Credit Card

IMA accepts the following credit cards (please complete the following)

Visa Mastercard Discover American Express

Card No: _____ 3-Digit Verification: _____

Card Exp. Date: _____

Name of Card Holder: _____

Billing Address: _____

Signature: _____