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|  | **District 1-A  District/State Dues Form** |

|  |  |
| --- | --- |
| Club Name |  |
| Club # |  |
| Payment Amount \* |  |
| Type of Credit Card (MC/VISA/DISCOVER/ AMEX) |  |
| Name on Card |  |
| Account Number |  |
| Card Expiration |  |
| Security Number on Back  of Credit Card (3 or 4 digits) |  |
| Billing Address |  |
| Comments |  |

\***Please note:** A credit card fee of 3.5% will be added to cover the cost of processing.

Your payment information will be forwarded to CT Andy Liamaga.

[flipbanker@aol.com](mailto:FLIPBANKER@AOL.COM) for processing.