



2017 HOLIDAY PARTY SPONSOR



THURSDAY, DECEMBER 7TH
7:00 PM TO 11:00 PM
HOTEL BAKER, ST. CHARLES, IL

COMPANY NAME: _____

CONTACT NAME: _____

PHONE: _____ EMAIL: _____

AMOUNT: _____



_____ I am paying by: **check #** _____ **TRANSACTION AMOUNT \$** _____

_____ I am paying by credit card: Visa ___ MC ___ Am Ex ___ Discover ___ **Expiration Date** _____

Card Number: _____

Name on Card: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Signature: _____

Phone #: _____

Payable to: IPPFA, 2587 Millennium Drive, Unit C Elgin, IL 60124

Office: 630-784-0406

Fax: 630 784 0416

E-mail: Julie.guy@ippfa.org

Thank you for your continued support