

2024 JOINT SERVICES AIR TRAFFIC CONTROL SYMPSOIMUM
Payment Instruction for Invoicing/Charging/Refund

This form is for anything to be Invoiced/Charged/Refund

1. Invoice Exhibitors/Sponsors
2. Charges for Exhibitors / Sponsors, or any other reason.

Attach any supporting documentation such as contract, charge request no more than one page. Account for any fees to be charged for a refund.

Invoice:		Charge:	Refund:
Total Invoice Amount:		Date:	
Point of Contact:		Booth #:	
Organization Name:		Booth Size:	
Address:			
City:	State:	Country:	Postal Code:
Email Address (for email receipts):			
Purpose/Coding:			
Comments:			

Sponsorship:	Total Booth Rental Fee:
	Total Sponsorship Fee:
	Total Due:
	Preferred Method of Payment is via Check or ACH: check should be made payable to Air Traffic Control Association and mailed to: 225 Reinekers Lane, Suite 400, Alexandria, VA 22314 – Attn: Deborah Brice, CMP
	Credit card Processing Fee (2.9% of total amount due):
	GRAND Total Due:
Credit Card #:	
Expiration Date: ____/____ CVV: _____	
Name on Credit Card:	
Address associated with credit card:	