

AEJMC \$100 for 100 Years Campaign

Name: _____

Address: _____

City, State, Zip: _____

Affiliation: _____

\$100 \$250 \$400 \$500 \$700 \$1,000 Other Amount \$ _____

Check Enclosed.

Credit Card: MasterCard VISA AMEX Discover

Amount: _____ Name on Card: _____

Account Number: _____

Exp. Date: _____ Security Code: _____ Signature: _____

**Form may be Faxed to 803-772-3509 or mailed to
AEJMC, 234 Outlet Pointe Boulevard, Suite A, Columbia, SC 29210-5667**

**As a 501(c)(3) organization, all contributions to AEJMC are tax deductible to the extent allowed
in section 170 of the IRS code. AEJMC will provide written acknowledgement for all contributions.**