



Don't want to pay online?

IPAC PAYMENT FORM FOR CHECK OR CREDIT CARD

Personal checks (made out to IPAC) or personal credit cards only.

Personal Check only:

Name: _____ Employer:* _____

Home Email Address:* _____ Occupation:* _____
For IPAC updates (both financial and informational)

Home Address : _____ ZIP: _____

**State law requires this information.*

Check # _____ payable to "IPAC" (Personal Check only)

Personal Credit Card only:

Charge \$ _____ to my (check one): Visa Master Card Discover Card

Card Number: _____ Expiration Date: _____ Card Verification No.: _____

Print Cardholder's Name: _____ Signature: _____

Billing Address of cardholder, if different from above (no PO Box numbers please):

Street: _____ ZIP: _____

Return this form (along with your IPAC check if paying by check) to: IPAC, 2648 Beechler Court, Springfield, IL 62703-7305

If you have questions please contact Ashleigh Knudson at 217-753-2213 or aknudson@iasaedu.org