

SPONSORSHIP RESPONSE FORM

NCPA 111th Annual Convention
 and Trade Exposition
 Ernest N. Morial Convention Center
 New Orleans, Louisiana
 October 17–21, 2009

Fax: NCPA Convention Department
 Attention: Lois Davis
 703-683-3619 fax

Call: 703-683-8200, ext. 655

Mail: NCPA Convention Department
 100 Daingerfield Road
 Alexandria, VA 22314

Respond Via

Sponsorship

Selection: _____ \$ Amount: _____

Selection: _____ \$ Amount: _____

Selection: _____ \$ Amount: _____

Payment Options

- My check is enclosed and made payable to **National Community Pharmacists Association** for the total of: \$ _____.
 - Please invoice me at the address below for the total of: \$ _____.
 - Charge my credit card for the total of: \$ _____:
- Visa MasterCard AmEx Discover

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