New Jersey Mosquito Control Association, Inc.

c/o Camden County Mosquito Commission
2311 Egg Harbor Road
Lindenwold, NJ 08021

INVOICE for Year 20___ ***(fill in year)***

Dues Payment: Thirty ($30.00) per Member per Year

Name(s):

Total Number of Memberships _____
@ $30.00 ea. - Total Amount of Invoice _____

Make Checks or Voucher Payable to:

New Jersey Mosquito Control Association, Inc.
and send to the above address

* If you are the director of a mosquito control agency or business that pays the dues of your employees, then this form may be used for all of them