American Accounting Association
Thought Leaders in Accounting

2015 Annual Meeting Advertising Application

Company/Organization: _____

Address: _____

_____

City: _____State: _____ Zip:_____

Advertising Contact Person and Title: _____

Phone: ( ) _____ Fax: ( ) _____

Email: _____

AAA Annual Meeting Advertising Selection August 8 – 12, Chicago, IL

☐ Annual Meeting Portfolio Insert ..... $3,000 _____

☐ Full Page Ad in Meeting Program ..... $1,500 _____

☐ Additional Full Pages Ads in Meeting Program (Specify number: ____) ..... $900 each _____

☐ List of Participants ..... $650 _____

Total…….....$ _____

Method of Payment:

☐ VISA ☐ MasterCard ☐ American Express ☐ Check

☐ Please send me an INVOICE. I understand my advertising will not be reserved or publicized until payment is received.

Card No.: _____ Exp. Date: _____

Signature: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip:_____

American Accounting Association • 5717 Bessie Drive, Sarasota, FL 34233-2399
Phone: (941) 921-7747 • Fax: (941) 923-4093 • Beverly Collins beverly@aaahq.org

For Office Use Only: to BC_____ to RS_____ Date Invoiced_____ Date Pd_____ Sent/Rec_____