

MEMBERSHIP INVOICE

2017-2018 Membership Dues Primary Location					\$ 275.00	
Additional Location (required)		\$50.00	x =		\$	
2017-2018 Legislative Fund					\$	
Vendor Partner			\$100.00			
NOTE: South Carolina Pawnbrokers' Association By-Laws require for ALL locations owned to qualify for membership. Legislative Fu are voluntary, but encouraged, requested, and appreciated.						
				TOTAL	\$	
The business information is vital in obtaining a correct da DIFFERENT FROM PHYSICAL . If you join with morthese locations please list these separately. You may add	re than one locati	on and wish	o receive e			
PRIMARY LOCATION STORE NAME	AME			CONTACT PERSON		
MAILING ADDRESS (STREET) NUMBER	CITY		STATE	ZIP	PHONE	
PHYSICAL ADDRESS (IF DIFFERENT)	CITY		STATE	ZIP		
E-MAIL ADDRESS and/or WEBSITE			FAX#			
ADDITIONAL ADDRESS (NEWSLETTER ONLY)	A	DDITIONAL	EMAIL			
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Use reverse or separate sheet if needed						

A CHECK FOR ONE YEAR'S DUES MUST ACCOMPANY APPLICATION AND SHOULD BE MAILED TO: South Carolina Pawnbrokers' Association

ATTN: Paul Murphy 502 East Blue Ridge Drive Greenville, SC 29609

For questions, call SCPA president Jay Friedman at (803) 252-1105 or email bonded@bellsouth.net.