



**Independent Insurance Agents of Mississippi  
Annual Convention and Trade Show  
Door Prize Sponsorship Form**

I wish to contribute to the IIAM Convention in the amount of \_\_\_\_\_.

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Bill me

\_\_\_\_\_ I wish to pay by credit card:

\_\_\_ Visa \_\_\_ Master Card \_\_\_ Amex \_\_\_ Discover

Card Number \_\_\_\_\_ Expiration \_\_\_\_\_

Signature \_\_\_\_\_

Please fax or email to:  
Stephanie Spahn  
sspahn@msagent.org  
Independent Insurance Agents of Mississippi  
601-939-9553 (fax)