

2021 Manuscript Payment Form

Phone: (888) 626-0630

Fax: (916) 444-7462

Journal of the American Mosquito Control Association

One Capitol Mall, Suite 800

Sacramento, CA 95814

Email:

amca@mosquito.org

ALL AUTHORS ARE REQUIRED TO PAY FOR THEIR MANUSCRIPTS.

PAYMENT MUST BE RECEIVED WITH THIS FORM. AUTHORS WILL NOT BE ALLOWED TO PUBLISH IN JAMCA IN FUTURE ISSUES UNLESS ALL PAYMENTS ARE RECEIVED.

FORMS MUST BE RECEIVED PRIOR TO:

January 15 (March Issue), April 15 (June Issue),

July 15 (September Issue), October 15 (December Issue)

PLEASE MAKE ALL CHECKS PAYABLE TO AMCA. ALL PAYMENTS MUST BE US DOLLARS.

Purchase orders must include the volume, issue number, title of article and author(s).

ARTICLE INFORMATION (Please Type or Print)

VOLUME	NUMBER	NO. OF PAGES	PO #
AUTHOR(S)			
TITLE OF ARTICLE			

MANUSCRIPT CHARGE (Must be paid for each article)

AMCA Member Rate: \$500

Non Member Rate: \$600

COST SUMMARY

Manuscript Charge	\$
TOTAL COST	\$

CREDIT CARD INFORMATION

Please charge my: Visa MC Amex Card No. _____

Exp. _____ Security Code. _____

Name (Please Print): _____ Signature: _____

BILLING INFORMATION (please type or print)

Name:			
Institution:			
Address (city, state, zip, & country):			
Phone #:		Fax #:	
Email:			