



AWS Job Posting

All job postings requiring payment must have the payment attached to the listing submitted.

Agency/Institution Name: _____

Position/s: _____

(attach extra sheet if necessary)

Requirements: _____

(attach extra sheet if necessary)

Contact Information: _____

Payment Information

Association of Women Surgeons
5204 Fairmount Avenue • Downers Grove, IL 60515
Phone: 630-655-0392 • Fax: 630-493-0798

Payment Information *(Please make all payments in US currency.)*

Check Visa MasterCard American Express

Total:

Card # _____ ExpDate: _____

Signature authorizes payment