



**STATE OF SOUTH CAROLINA
DEPARTMENT OF CONSUMER AFFAIRS**
**MOTOR CLUB REPRESENTATIVE APPOINTMENT
SUMMARY**

Mailing Address
P.O. Box 5757
Columbia, SC 29250-5757

www.consumer.sc.gov

Street Address
2221 Devine St. Ste. 200
Columbia, SC 29205

Date: _____

Company Name _____
Street Address _____
Mailing Address _____
City/State/Zip _____

SSN	Name of Representative
1.	
2.	
3.	
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19.	
20.	
Total number of representatives _____ (@\$20.00 per representative) = total fee due and enclosed. \$ _____	
Failure to remit total fees due will result in return of applications	

Please attach all appointments to this Summary

For Department Use Only