STREATOR CHAMBER
OF COMMERCE

320 E Main Street • P.O. Box 360 • Streator, IL 61364
(815) 672-2921 • info@streatorchamber.com • www.streatorchamber.com

Membership Investment Agreement

MISSION:

- Preserving our competitive enterprise system
- Appreciating the importance of all businesses
- Addressing current economic issues
- Representing members on city, county, state, national and political affairs
- Promoting business and community growth
- Offering education programs

COMMITMENT: "Your membership dues investment will be used to create a positive community economic environment in which a business may make profit."

MEMBERSHIP INVESTMENT SCHEDULE

The Board of Directors request that you use the approved dues investment schedule to compute your prorated share in financing the programs, services, and activities of the Streator Area Chamber of Commerce & Industry.

Please note that (2) PTE equals (1) FTE.

GENERAL BUSINESS & SERVICES

No. of Execs & Emp (FTE)	Annual Investment
1 – 5	$300
6 – 10	$400
11 – 16	$450
17 – 25	$525
26 – 35	$575
36 – 49	$650
50 – 75	$850
76 – 100	$1,000
101 – 199	$1,225
200+	Negotiate

INDUSTRIAL, MANUFACTURING & DISTRIBUTION

No. of Execs & Emp (FTE)	Annual Investment
1 – 5	$400
6 – 15	$550
16 – 25	$800
26 – 50	$900
51 – 75	$1,075
76 – 100	$1,225
101 – 150	$1,550
151 – 200	$1,850
201 – 300	$2,300
301 – 400	$2,650
401 – 499	$2,900
500+	Negotiate

PROFESSIONALS

Accountants, Attorneys, Engineers, Medical, Stockbrokers & Insurance Agents

	Annual Investment
1 Professional	$300
2 Professionals	$480
3 Professionals	$660
4 Professionals	$840
Each Additional Prof.	$180

FINANCIAL INSTITUTIONS

Annual Investment - $50 per million in assets

CIVIC INVESTOR

	Annual Investment
Non-Business i.e., Civic (Non-Profit, Religious, Fraternal Organization, Schools, Individuals)	$115

HOSPITALS, UTILITIES, MEDIA

Negotiate

GOVERNMENT

Negotiate

RESTAURANTS

No. of Execs & Emp (FTE)	Annual Investment
1 – 5	$300
6 +	$400

Please complete other side.

COMPANY INFORMATION

Firm name: _____

Street address: _____

P.O. Box _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Main Email: _____

Website: _____

Type of Business: _____ No. of Employees: FT: ____ PT: ____

CONTACT PERSON(S)

Name (Primary Contact): _____ Title: _____

Email: _____ Cell: _____

Name (Billing Contact): _____ Title: _____

Email: _____ Cell: _____

BILLING INFORMATION

Firm name: _____

Street address: _____

P.O. Box _____

City: _____ State: _____ Zip: _____

Amount of Annual Investments: $_____ Recommended By: _____

This investment is payable in advance and is continuous unless cancelled in advance of the due date. Membership dues are not deductible as charitable contributions for federal income tax purposes. However, MEMBERSHIP DUES ARE DEDUCTIBLE as ordinary and necessary BUSINESS EXPENSES. This Investment Agreement must be signed by an authorized person with the member firm.

Signed: _____ Title: _____ Date: _____