



**STREATOR AREA CHAMBER OF COMMERCE & INDUSTRY**

- MISSION:**
- Provide Positive Public Leadership
  - Promote Economic Opportunity
  - Enhance the Quality of Life
  - Increase Positive Community Awareness

**PRIORITIES:** Increase Employment Opportunities and Business Investment

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

**GENERAL BUSINESS & SERVICES**

No. of Execs & Employees (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 - 200	1,225
201+	Negotiate

**INDUSTRIAL & DISTRIBUTION**

No. of Execs & Employees (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 - 500	2,900
500+	Negotiate

**PROFESSIONAL**

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

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

**HOSPITAL, UTILITIES, MEDIA**

Negotiate

**FINANCIAL INSTITUTIONS**

Annual Investment - \$50 per million in assets

**CIVIC INVESTOR**

Non-Business i.e. Civic, Not-For-Profit, Religious, Fraternal Organizations, Retired Individuals  
Annual Investment - \$115

**ASSOCIATE INVESTOR (Non-Resident)**

Annual Investment - \$300



**STREATOR AREA CHAMBER OF COMMERCE & INDUSTRY**

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**DUES INVESTMENT AGREEMENT**

FIRM NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ P.O. BOX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ INTERNET: \_\_\_\_\_

BUSINESS CLASSIFICATION: \_\_\_\_\_ NO. OF EMPLOYEES: \_\_\_\_\_

**CONTACT PERSON(S)**

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

**BILLING INFORMATION**

FIRM NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ P.O. BOX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BILLING OFFICER: \_\_\_\_\_ TITLE: \_\_\_\_\_

AMOUNT OF ANNUAL INVESTMENT \$ \_\_\_\_\_ RECOMMENDED BY: \_\_\_\_\_

This investment is payable in advance and is continuous unless cancelled in advance of 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 \_\_\_\_\_