Waupaca Area Chamber of Commerce Investment Agreement

COMPANY INFORMATION		
Company Name		D.B.A.
		D.D.T.
Mailing Address		
Physical Address (if different)		
Billing Address (if different)		
Phone	Fax	Federal ID
Date Business Established Business Email		
Number of Employees Nu Full-Time	mber of Employees Part-Time Website	
Facebook		Twitter
Main Contact Email		
INVESTMENT SCHEDULE BUSINESS CATEGORIES		
Base Rate = \$299.00 (includes one owner/professional) Plus additional fees per category		
Financial Institutions \$19.50 per million in local assets Hospital/Nursing/Care Facilities \$4.10 per bed (locally) Hotel/Motel/Inn/Bed & Breakfast includes base rate \$8.05 per room/unit (locally)		
Industry/Retail/Service/Technical/Home-based Business \$ 9.85 per full-time equivalent up to 100 (includes additional owners/partners) \$ 2.00 each additional full-time equivalent (over 100 employees) Agriculture/Associate/Clubs & Organizations/Government Agencies No additional fees.		
Professional		
PAYMENT INFORMATION		
Annual Investment	Check#	Cash Visa MC Discover
Additional Fees	Account	nt Number
Total Due		Sec Code Exp Date
Signature		Date
Return the Investment Agreement, Investment Worksheet and Investment Fee payment to:		

Return the Investment Agreement, Investment Worksheet and Investment Fee payment to Waupaca Area Chamber of Commerce, Inc., 315 S Main Street, Waupaca WI 54981 (715) 258-7343