

Annual base dues paid by all company/organization members other than those with specific category fees

Number of Employees

1-5	\$350
6-15	\$422
16-25	\$561
26-50	\$850
51-100	\$1700
101-200	\$2132
201-350	\$2833
351-500	\$3548

Specific Category Fees:

Apartments/Hotels/Motels.....	\$700
Commercial developers/brokers.....	\$1288
Financial related companies	(per location) \$773
Professionals (\$350 Base +)	(per professional) \$50 (Attorneys, Accountants, Physicians, Architects, Engineers)
Residential developers	\$649
Shopping centers	(per location) \$917
Business non-profit groups, 501 C (6)	\$350
Charitable non-profit groups, 501 C (3)	\$196
Retired executives	\$129

Other:

Link to Website.....	\$25
Member to Member Discount	\$25
For each additional listing.....	\$206
For each category listing	\$180

**ACH PREAUTHORIZED PAYMENTS AGREEMENT (DEBTS)
(BANK DRAFT)**

This is my authorization to the Cary Chamber of Commerce, (56-0989726) to automatically debit my _____ checking or _____ savings account.

_____ **(Account Number)**

_____ **(Bank Transit/ABA No.)**

at _____ (financial institution) in _____ (city) _____ (state)

I understand that this authorization will be in effect until I notify my financial institution in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I have the right to stop payment of a debit entry by notifying my financial institution before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my financial institution, if, within 15 days following the date on which I was sent a statement of account or a written notice of such an entry or 45 days after posting, whichever occurs first, I give my financial institution a written notice identifying the entry, stating that it is in error and requesting credit back to my account.

THIS AUTHORIZATION IS NON-NEGOTIABLE AND NON-TRANSFERABLE.

Company/Business Name

Customer Name

Date

DRAFT OCCURS Monthly on the 15th