

737 13th St. SE ● Salem, OR 97301 ● 503-588-2430 ● Fax 503-588-2577 www.ocapa.net

STEP 1:

Contribution

Associate Member

Application or Renewal July 1, 2023– June 30, 2024

Please return form with payment by July 1, 2023

(For Office Use Only) Date Received:

Your Primary Contact Information	Company Name		J# (If any)	Number of Employees in Oregon (FTE) *				
	Billing Address	Ci	ty	State	Zip			
	Phone	Fa	ах	Oregon CCB (# if any)				
	Key Contact Name	Jo	b Title	Email				
	Ass	ociate Member A	nnual Dues for July	2023 — June 20	24			
STEP 2: Calculate Dues	Annual dues are determined according to the Associate Group to which your business belongs.							
	Full payment for the fiscal year must accompany all renewals. Mark the box for your appropriate Group:							
	☐ Group 2 ☐ Group 3	FLY ASH COMPANIES ADMIXTURES COMPA	ANIESQUIPMENT, & SERVICE SUF		\$2,180 \$1,675			
	= Group 4	Dealers of trucks and related equipment; cement and bulk transportation equipment & distributors; construction materials suppliers; portable crushing services; precast concrete products, concrete pumping services; miscellaneous product sales firms; engineering, architectural, geological, hydrological, insurance, legal, or consulting firms; and testing labs.						
	□ Group 5 CONCRETE CONTRACTORS (OR or WA License):							
STEP 3: Concrete Promotion Fund	Donations will l	be dedicated funds to sup	nd Donation for 2023/202 sport and expand activities of ducation. Donation may be ac	OCAPA's Promotion Co				
STEP 4: Payment Options	Dues Amount		+ Promotion Fund Do					
	Amount Paid:		(Note: a 5% convenience fee □Credit Card Name:		•			
	Card #	e	exp:/ Code: Signati	ıre				
STEP 5: PAC Contribution	Political Action Committee (PAC) Contribution No previous commitment? We suggest you use the following formula:							
	Suggeste	ed contribution formula: Due	es \$ x 20%	=				
	Your Annual PAC Contribution for 2023/2024:\$							
STEP 6: WRLC		ources Legal Center (W	•					

Main Location Information:

Wall Education Information.										
Company Name:										
Physical Address:	City/State/Zip:									
Toll Free #:			Phone:		Fax:					
Website:		Email for General Inquiries:								
List company contacts at Main Location to include in directory and/or have access to OCAPA's Members Only website:										
Name (Mark all names you want to appear in Job Title the printed OCAPA Directory with an *)		Eı	mail	Phone						
Additional Company Locations/Offices Information:										
Company Name:										
Address:		City/State	/Zip							
Toll Free #:		Phone:		Fax:						
Physical Address:										
City:		State:		Zip	:					
List company contacts at this location	to include in di	rectory and	/or have access to OCA	APA's	Members Only website:					
Name	Job Title	En	nail	Pł	none					
Primary Service or Product:										
Description of company products & services for directory:										

Membership dues are not deductible as a charitable contribution, but may be deducted as an ordinary or necessary business expense. A portion of dues, however, is not deductible as an ordinary or necessary business expense to the extent the Association engages in lobbying activities as defined by the Internal Revenue Service (IRS). The non deductible portion is 9 percent.