

FAIRPAY FOR NORTHERN CALIFORNIA NONPROFITS: THE 2017 COMPENSATION AND BENEFITS SURVEY

Participant Prepay Order Form

Contact information:					
Contact Name		Contact Title			
Contact Email		Organization _			
Executive Director or Agent					
Address					
City	Sta	ate	Zip		
Phone	We	ebsite			
Payment:					
□ VISA □ MasterCard	Credit Card Number		Expiration Date		
	3 or 4 digits	3 or 4 digits on back of Visa/MC and front of Amex			
Check enclosed Name on Card	Billing Add	ress of Card			

Amount:

As in the past, it costs nothing to participate in the survey. However, you can pre-pay when you participate and save your agency 67% off the non-participant price. It's like an early bird special.

The price depends on your organization's total annual expenses:

Your organization's total annual expenses	Prepaying 2017 survey participants	2017 Survey participants (after March 3, 2017)	Non-participants
Under \$500,000	\$60	\$65	\$180
\$500,000 – 1 million	\$90	\$100	\$270
\$1 – 2 million	\$120	\$130	\$360
\$2 – 5 million	\$150	\$165	\$450
Over \$5 million	\$180	\$195	\$540

Submit Your Order:

Mail form with check to:

Nonprofit Compensation Associates, Inc. P.O. Box 10737 Oakland, CA 94610

If you have questions, email <u>survey@nonprofitcomp.com</u> or call 510-645-1005.