

2020 MEMBERSHIP APPLICATION

Associated Builders & Contractors of Oklahoma

1915 N. Yellowood Ave. Broken Arrow, OK 74012 www.abcokla.org Phone: (918) 254-8707 Branch: (405) 254-5063 info@abcokla.org

| Company Name | e | | | | |
|--------------------------------------|---|---------|--|-----------|--|
| | | | | | |
| | | | | | |
| City | | | | State Zip | |
| Susiness Phone | > | | Fax | | |
| mail | | | Website | | |
| resident/CEO | | | | | |
| President/CEO | | | Mobile | - Email | |
| Financial Officer | | | Mobile | Email | |
| Are you a member of another Chapter? | | ☐ Yes | If your company belongs to another ABC Chapter, contact the ABC of | | |
| | If yes, which | one(s)? | | | |
| Vork Regions | Local | ☐ State | ☐ National | | |
| | Local any's ABC Representatives | State | ☐ National | | |
| Your Compa | any's ABC Representatives | - | | | |
| Your Compa | any's ABC Representatives t | - | | Title | |
| Your Comparimary Contac | any's ABC Representatives | - | | Title | |
| Your Compa | any's ABC Representatives t | - | | | |
| Your Comparimary Contact | t Name | - | | | |
| Your Comparimary Contact | t Name Name Name | - | - Email | | |
| Your Comparimary Contacted | t Name Mobile Mobile Mobile | - | - Email | Title | |
| rimary Contac | t Name Mobile Name Mobile Name Mobile Name Mobile | | Email Email | Title | |

| Category (Based on previous year's gross revenue reported on your Federal Tax Return. Check one.) | | | | | | |
|---|--|--|---|--|--|--|
| Category | Contractor - \$250 Million & Over | \$8260\$7740\$6700\$5100 S\$4300\$3670\$2900\$1300\$1300\$2200\$2200\$2200 | Contractor - General and Specialty (those that bid or perform installation on the jobsite). Category 4 to 14. Supplier (manufacture or deliver materials to the jobsite). Category 2. Industry Professional (provide business services to the contractors and suppliers). Category 1A or 1B. New Members (Category 1A & 1B) Only One time Initiation Fee - \$300 | | | |
| 1 | iption (Company's main business or service) | | | | | |
| Contractor Members | : CSI Codes / Scope of Work | Suppliers / Industry | Professionals: Material or Service Provided | | | |
| Payment | | | | | | |
| My Annual Dues \$ _ Credit Card Type | □ Visa □ Mastercard □ Discover | ☐ Check Enclos | press | | | |
| Name on Card | | Authorized Signature | | | | |
| Tax Deductible | | | | | | |
| ABC dues are not de A % of your dues are | ductible as a charitable contribution for Federal ince not deductible because they are related to lobbying | ng activities on behalf o | | | | |
| Application Signed | l Bv | Title | Date | | | |