



## ANNUAL RENEWAL & INVOICE: July 1, 2020 – June 30, 2021 (Includes your renewal with the New York Council of Nonprofits – NYCON)

Organization \_\_\_\_\_  
(As you would like to be listed)

Name & Title \_\_\_\_\_

Email(s) (Include Assistants) \_\_\_\_\_

HR \_\_\_\_\_ CFO \_\_\_\_\_

COO \_\_\_\_\_ Compliance \_\_\_\_\_

**Primary Service Area** (If you provide several services, please rank them 1,2,3...)

- |   |   |
|---|---|
| <input type="checkbox"/> Animals and/or Environment<br><input type="checkbox"/> Arts and Culture<br><input type="checkbox"/> Children and Youth<br><input type="checkbox"/> Disabilities<br><input type="checkbox"/> Disease/Health Awareness and/or Prevention | <input type="checkbox"/> Education<br><input type="checkbox"/> Human Services and/or Aging<br><input type="checkbox"/> Legal and/or Financial<br><input type="checkbox"/> Mental Health or Substance Abuse<br><input type="checkbox"/> Other (list) _____ |
|---|---|

**PLEASE UPDATE to show our collective impact** Total # Employees \_\_\_\_\_

Operating Budget \$ \_\_\_\_\_ Clients/Participants/Members \_\_\_\_\_  
(# of individuals served annually)

✓	<b>CALCULATE YOUR DUES BASED ON BUDGET LISTED ABOVE</b>	
	\$850	\$20,000,000 and higher
	\$795	\$10,000,000 - \$19,999,999
	\$585	\$5,000,000 - \$9,999,999
	\$435	\$1,500,000 - \$4,999,999
	\$275	\$700,000 - \$1,499,999
	\$185	\$300,000 - \$699,999
	\$120	\$299,999 or less

2020-2021 Annual Dues Enclosed: \$ \_\_\_\_\_

**Please mail this form with check payable to: COAE/CCSI - Council of Agency Executives**  
 PO Box 10547  
 Rochester NY 14610-0547

**Thank you for your prompt renewal by June 30. Questions? 585.301.8383**