



Invoice

Date
INVOICE #

To:

Annual Dues *www.ltcif.com*

Amount Due Per Company
Annual Dues Invoice – 1/1/2010 – 12/31/2010
Amount Due: \$250.00

Please complete the following and return this sheet with your payment:

Member Company:

Corporate Website:

Address:

City: _____ State: _____ Zip: _____

Primary Contact Person:

Email Address:

Phone Number:

Fax Number:

**Company Operational Areas
(may indicate more than 1):**

Underwriting _____	Operations _____
Claims _____	Vendor/Service Provider _____
Actuarial _____	Other _____

Make all checks payable to LTCI Forum, Inc. (Fed Tax ID 75-287 4444)

Mail To:
 Rebecca Freeman, LTCIF Treasurer
 2380 Deerpath Circle
 Neenah, WI 54956
 Email: Becky.Freeman@thrivent.com

Total Enclosed:	
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Thank you for your Membership!