



CORE MEMBERSHIP RENEWAL FORM

UTILITIES TELECOM COUNCIL

UTC's membership year runs from October 1, 2008 through September 30, 2009. UTC membership fees are based on total gross annual revenues from the most recent fiscal year. Calculate your annual fee based on the table shown below.

ANNUAL REVENUE	MEMBERSHIP FEE
Revenue < \$11M	\$385
\$11M ≤ Revenue ≤ \$30M	\$642 + \$28.90 per 1M over 11M
\$30M < Revenue ≤ \$100M	\$1,240 + \$15.00 per 1M over 30M
\$100M < Revenue ≤ \$350M	\$2,342 + \$9.10 per 1M over 100M
\$350M < Revenue ≤ \$1.0B	\$4,620 + \$5.00 per 1M over 350M
\$1.0B < Revenue ≤ \$3.0B	\$8,000 + \$2.65 per 1M over 1.0B
\$3.0B < Revenue ≤ \$10.0B	\$13,450 + \$1.25 per 1M over 3.0B
Revenue > \$10.0B	\$22,365

Sample Fee Calculation: If your organization had \$50 Million in total annual corporate revenues last year, you fall in the \$30-\$100 Million category. To calculate your fee, take the difference between the base revenue amount and gross revenue amounts (\$20M) and multiply the difference by the appropriate multiplying factor for that category (\$15.00). Then add this total (\$300.00) to the base amount (\$1,240) for that category. The result (\$1,540) is your organization's annual membership fee.

Please note: Contributions or gifts to UTC are not deductible as charitable contributions for Federal income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses. For these purposes, UTC estimates that 5% of your membership fee will be allocable to nondeductible lobbying activities during the ensuing fiscal year.

UTC offers three easy ways to renew your organization's membership in the association.

BY MAIL:

Send this form with payment to:
UTC Membership Department
Post Office Box 79358
Baltimore, MD 21279-0358

BY FAX:

Fax this page, with completed
Credit Card information to:
202.872.1331,
ATTN: Membership Renewal

ONLINE:

Go to UTC's Membership Renewal
Web site at: renew.utc.org

Please detach lower portion and remit with payment.



Core Membership Renewal: 2008-2009

Our Annual Revenue = \$ _____ Our Annual Membership Fee = \$ _____
See Table above.

If paying by credit card, please indicate card type: Visa MasterCard American Express

Cardholder's Name _____ Card Number _____ Expiration Date _____

Billing Address _____ City/State _____ Zip/Postal Code _____ Cardholder's Signature _____

PLEASE SEND INVOICE. Please check here if your organization requires an invoice to process payment.

Please list all contact information below. Questions? Please contact Kristy Weinschel, Director of Membership, at 1.202.833.6815 or kristy.weinschel@utc.org.

Name _____ Title _____

Company _____

Address _____

City, State/Province _____ Zip _____ Phone _____

Fax _____ E-mail Address _____