



2015 LeadingAge IL Salary Survey Report Order Form

2015 LeadingAge IL Salary Reports (reports will be sent electronically in a .pdf format)

Please indicate the type(s) of reports you wish to order:

LeadingAge IL Organization Member Cost

- | | |
|--|-------|
| <input type="checkbox"/> 2015 Independent Living/Assisted Living Communities Report: | \$250 |
| <input type="checkbox"/> 2015 Nursing Home Report: | \$250 |
| <input type="checkbox"/> Both Independent/Assisted Living & Nursing Home Reports: | \$450 |

(Reminder: If organization completed the 2015 Salary Survey, you will receive both reports FREE)

LeadingAge IL Business Member Cost

- | | |
|---|-------|
| <input type="checkbox"/> 2015 Independent Living/Assisted Living Breakout Report: | \$275 |
| <input type="checkbox"/> 2015 Nursing Home Breakout Report: | \$275 |
| <input type="checkbox"/> Both 2015 Reports: | \$500 |

Non-LeadingAge IL Member Cost

- | | |
|---|---------|
| <input type="checkbox"/> 2015 Independent Living/Assisted Living Breakout Report: | \$550 |
| <input type="checkbox"/> 2015 Nursing Home Breakout Report: | \$550 |
| <input type="checkbox"/> Both 2015 Reports: | \$1,100 |

Organization Name: _____

Contact Person: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail where reports should be sent: _____

Total Enclosed: \$ _____ Check Enclosed (make checks payable to LeadingAge Illinois)

Please charge my: ☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

Card Number: _____ Expiration Date: _____

Signature: _____

Billing Address: _____

City/State/Zip: _____

Please mail completed order form with payment to:
LeadingAge Illinois, 1001 Warrenville Rd., Suite 150, Lisle, IL 60532.
Order forms may be faxed with a valid credit card number to 630.325.0749.