



INVOICE

2019 CASE/ACES ORGANIZATIONAL ANNUAL MEMBERSHIP

Date: _____

Name of Company: _____

Contact Person (first and last name): _____

Address: _____

City, Province and Postal Code: _____

E-Mail Address: _____

Phone Number: _____

| Renewal Period | Description | Amount |
|--------------------------------------|--|----------|
| January 1 – December 31, 2019 | ORGANIZATIONAL Membership for Canadian Association for Supported Employment (CASE) | \$125.00 |
| TOTAL ENCLOSED: | | |

*If you wish to pay via PayPal, please visit the following link:

<http://www.supportedemployment.ca/membership-registration/>

Please make cheque payable to: **Canadian Association for Supported Employment**

Mail to: **Canadian Association for Supported Employment**
c/o Jeanette Paynter
TEAM Work Cooperative
501-7051 Bayers Rd
Halifax NS B3L 2C1

Questions concerning this invoice can be directed to cketchen@cciwestman.ca

Thank you for your participation in the supported employment community.

www.supportedemployment.ca

www.employmentforall.ca