

## **Carrier Membership Application**

## Membership Roster Listing

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COMPANY NAME	US DOT NO:									
PHYSICAL ADDRESS	CA NO:									
CITY		STATE		ZIP	MAIN PHONE NO.					
MAILING ADDRESS	FAX NO.									
CITY		STATE		ZIP	WEBSITE					
BILLING ADDRESS	BILLING PHONE NO.									
CITY		STATE		ZIP	# OF TERMINALS:					
PRIMARY CONTACT NAME	TITLE	PHON		E:	EMAIL:					
BILLING CONTACT NAME	TITLE	TITLE		E:	EMAIL:					
Primary Business Activity of Company										
□ Agricultural □ Automobile □ Bulk (Liquid/Dry) □ Construction □ Couriers □ Dump □ Flatbed □ Forest □ Freight Brokers □ General Freight Less Than Truckload  Number of Employees Indicate number of employees: □ Employee List		S Placard Tow — Tow — Cialized Moving — North — South	ds North South I (Ove I Good I I Per Cro	□ Livestock □ Logistics Carriers (3PL) □ Multistate □ Petroleum Tank Truck □ Private Fleet □ Refrigerated □ Waste Haulers □ Non-Asset Carriers □ Other:						
to our website.	med on your members	snip, pi			ou would like to receive emails and login access					
NAME	TITLE		PHONE:		EMAIL:					
NAME	TITLE			IE:	EMAIL:					
NAME	TITLE		PHON	VE:	EMAIL:					
NAME	TITLE	P		E:	EMAIL:					
NAME	TITLE	 E		IE:	EMAIL:					
NAME	TITLE		PHON	NE:	EMAIL:					

Annual Dues Investment Schedule						
Below is the official calculation methodology approved by the CTA Please complete the following calculation for your company. Dues (mandatory investment that provides financial resources that can the trucking industry). If your company is a non-asset carrier (f and check the box under Section 2.	s investme suppleme	nt includes a one-ti nt litigation, legal ar	me \$100 Unit Fee as well as the standard section and other legal related	ne annual CTA Legal Fund items that are affecting		
Section 1: Equipment Information (Class 7 and 8 Trucks)  A. How many California registered trucks (CA License Plate) are full time owner/operators?	owned, lea	ased, rented, and o <sub>l</sub>	perated by your company, inclu	uding		
Interstate Operations (Class 7 and 8 Trucks)						
B. For trucks registered outside of CA (Non-CA License Plate) th please provide the number of trucks based, operated, and appear of trucks in IRP Program multiplied by	ortioned t	o California by com		n:		
C. Add the number of trucks on lines A and B above to determine	the annu	al dues amount				
1–5 power units: \$1,104.67						
Truck Unit Pac Voluntary annual contribution of \$200.00 to support CTA's small of Method of Payment	ontributor	committee that pro	motes pro-trucking candidates	for state office.		
PAYMENT METHOD:  ☐ Check ☐ Visa ☐ MasterCard ☐ American Express ☐	Electronic	cally (EFT/ACH) - Re	equest EFT/ACH Payment Autho	orization Form		
NAME THAT APPEARS ON CARD:		ACCOUNT NUMBER:				
BILLING ADDRESS:			EXPIRATION DATE:	CCV:		
CITY:		ZIP:	BILLING PHONE NO.:	'		
Dues investment is not deductible as a charitable contribution but may deductible as a business expense. However, CTA estimates that 25%		ANNUAL DUES INVESTMENT AMOUNT	\$			
deductible as a business expense because of CTA's lobbying activitie behalf of members.		VOLUNTARY TRUCK UNIT PAC	\$ 200.00*			
This is a 12-month membership dues investment that will automatical at the end of the 12-month period. With the CTA automatic membership will always be current, so you'll continue to		*Please cross out if you do not want to include a PAC contribution.				
your benefits uninterrupted.	, 1000,110					
Contributions to Truck-Pac are voluntary and not tax deductible.						
Membership Partner Agreement Any member may withdraw from this Association by giving sixty (6) the payment of dues or other financial obligation after sixty (60) d						
MEMBER SIGNATURE:		DATE SIGNED:				
REASONS FOR JOINING (CHECK ALL THAT APPLY)  Compliance Events Legislative Disco	unts ⊡iEd	ucation   Other				
□ Poforral Poforrad by:	C	mnany Nama:				

Mail, fax or email completed application to: