



**Golden Triangle Minority  
Business Council, Inc.**

Post Office Box 5064  
Beaumont, Texas 77726-5064

**INVOICE**

Owner Name: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

**Invoice Number: 2018-302-230-----**

| Date       | Description  | Amount |
|------------|--|--------|
| 00/00/20-- | <p style="text-align: center;"><b>GOLDEN TRIANGLE MINORITY<br/>BUSINESS COUNCIL, INC.<br/>20--- "NEW"<br/>M/WBE/HUB/DBE CERTIFICATION APPLICATION<br/>ANNUAL PROCESSING FEE</b></p> <ul style="list-style-type: none"> <li>• \$150 dues for companies with annual sales less than \$1 million;</li> <li>• \$200 dues for companies with annual sales between \$1 million to \$5 million;</li> <li>• \$500 dues for companies with annual sales over \$5 million</li> </ul> <p style="text-align: center;">All fees are Non-refundable</p> <p style="text-align: right;"><b>Total: \$ _____.00</b></p> <p style="text-align: center;">(GTMBC 501( c)(3) Taxpayer I.D. # 76-0549413)<br/><b>THANK YOU!</b></p> |        |

**Terms: Payable Upon Receipt of this Invoice**

Remit to: Golden Triangle Minority Business Council, Inc.  
 Post Office Box 5064 Beaumont, Texas 77726-5064  
 409.962.8530 FAX: 409.892.1787 E-Mail Address: [hatcher.beverly@gtmbc.com](mailto:hatcher.beverly@gtmbc.com)

|   |       |             |                  |               |                   |             |      |
|---|-------|-------------|------------------|---------------|-------------------|-------------|------|
| <b>For Credit Card PAYMENT *Fax 409.892.1787*Mail: P.O. Box 5064, Beaumont, TX 77726-5064</b> |       |             |                  |               |                   |             |      |
| Method of Payment   | Check | Money Order | American Express | Carte Blanche | Diner's Club      | Master Card | Visa |
| Credit Card Number:   |       |             |                  |               | Exp. Date         |             |      |
| Name of Card Holder:  |       |             |                  |               |                   | 3 Dig Code: |      |
| Billing Address:  |       |             |                  |               | Billing Zip Code: |             |      |
| Signature   |       |             |                  |               |                   |             |      |