

**ONE OKALOOSA EDC INVESTOR COMMITMENT FORM**

**O**ne Okaloosa EDC is a private-public non-profit organization committed to the growth and diversity of Okaloosa County industry and technology. By sharing your organization's resources through investment and participation, you ensure that our efforts continue and that our community continues to enjoy the benefits of those efforts.

**Investor Information**

**Twelve-Month Commitment:**    Trustee: \$3,500\*    Corporate: \$1,500\*\*    Enterprise: \$750

*\*Trustee Level membership includes one seat on One Okaloosa EDC's*

*Business Leadership Council (BLC) which meets bi-monthly.*

*\*\*TeCMEN participation, for a qualified industry, requires a Corporate Level or higher investment.*

Please provide information as you wish for it to appear in published media.

**Company Name:** \_\_\_\_\_

Product/Service: \_\_\_\_\_

NAIC: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Location Address (if different): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Web Site: \_\_\_\_\_ No. Employ: \_\_\_\_\_

Publish in membership directory?:    Yes    No

Contact me for logo:    Yes    No

**Primary Representative:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Additional Representative:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Business Leadership Council Representative** *(Only applicable to Trustee Level Investors):*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

*As a non-profit organization, thank you for providing support in check form. FEIN 59-2288214*

Check Amount: \$

Check #:

Check Date:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you for supporting your economic development organization!*

Please remit form with corresponding payment to One Okaloosa EDC at:  
PO Box 4097 • Fort Walton Beach, Florida • 32549 • Phone 850-362-6467 • <mailto:nathan@oneokaloosa.org>