

**GOLDEN GATE CHAPTER
ASSOCIATION OF LEGAL ADMINISTRATORS
SALARY AND BENEFIT SURVEY ORDER FORM**

For Period Ending July 1, 2011

The results of the entire Bay Area survey are compiled and published in a Bay Area Report. In addition, the San Francisco, East Bay, and South Bay regional report results are included.

Prices listed below include the full Bay Area Report, three Local Reports and the Benefit Supplemental.

Prices vary according to the size of your firm. Firms with multiple offices should order according to the size of their largest Bay Area office. If each office wants its own set of the full Bay Area, each office should order its own set and pay according to the size of their specific office.

Number of Attorneys in Firm	Participant* Order Received Before July 1	Participant* Order Received After July 1	Non-Participant
1-20	\$300 •	\$375 •	\$455 •
21-50	\$400 •	\$515 •	\$600 •
51-100	\$500 •	\$650 •	\$725 •
101-150	\$600 •	\$700 •	\$860 •
Over 150	\$650 •	\$850 •	\$975 •

Amount Enclosed: \$ _____ Discount Code: _____

I wish to participate in the Survey but do not want to purchase a survey at this time. •

The individual who completes this form will be listed as the Primary Firm Contact and will receive the Survey results. If completing the Survey for more than one office, please complete the address for each office. If the Primary Contact is not the person completing the Survey, please indicate the name and contact information below. Also, if multiple individuals will be completing the Survey for their respective office, please provide the name and contact information for each individual.

Contact Name	Email Address	Phone Number	Address
_____	_____	_____	_____

<p style="text-align: center; margin: 0;">Please attach Business Card or fill out below</p> <p>Name: _____</p> <p>Title: _____</p> <p>Firm Name: _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Phone No.: _____</p> <p>Fax No.: _____</p> <p>E-mail: _____</p> <p>Number of Attorneys in local office: _____</p> <p>Local Office: SF ___ East Bay ___ South Bay ___ North Bay ___</p> <p>ALA Member: Yes ___ No ___</p> <p style="text-align: center; font-size: small; margin-top: 5px;">Questionnaires/Results will be sent to the person listed above.</p>	<p>Please make checks payable to: GOLDEN GATE CHAPTER ALA</p> <p>Mail Order to:</p> <p style="text-align: center; margin-left: 40px;">McGladrey ALA Salary Survey Orders One South Wacker Drive Suite 800 Chicago, IL 60606</p>
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*Note: Participant must complete at least 75% of survey.