

**BECOME A MEMBER OF THE  
ARIZONA STATE CONTRACTORS COALITION  
LEGISLATIVE ACTION TEAM**

Name (Please Print): \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ Industry: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home City: \_\_\_\_\_ Home Zip Code: \_\_\_\_\_

- Yes, you may use my name in supporting the coalition!  
Keep Me Informed! Let Me Know How I Can Help!**

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**ASCC**

**FAIRNESS** In Contracting

**BETTER** Quality Projects

**SAFER** Places to Work

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