



Institute for Credentialing Excellence

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Invoice Date:

Invoice Number:

ICE Federal Tax ID: 52-1111515

Organization Name and Contact Information:

| QTY. | ITEM/DESCRIPTION | UNIT PRICE | TOTAL |
|------------------|---|--|-----------|
| | ICE Member Application Fee (initial or re-accreditation application) | \$2,584 | \$ |
| | ICE Member Subsequent Linked Application Fee (initial or re-accreditation application) This fee applies to each additional program that is linked to the first application for a member organization. Linked applications must be submitted for the same deadline. | \$1,680/application up to a max fee of 10 applications | \$ |
| | Non-Member Application Fee | \$ 3,443 | \$ |
| | Subsequent Application Fee (initial or re-accreditation application) Note: This fee applies to each, additional program application after the first for any organization (member or non-member) that is submitting multiple accreditation applications at the same deadline. | \$2,243/application up to a max fee of 10 applications | \$ |
| TOTAL DUE | | | \$ |

CHECK PAYMENT INSTRUCTIONS

Please make checks payable to ICE. Checks made payable to NCCA will be returned.

Mail your check along with a copy of this invoice to:

Institute For Credentialing Excellence
PO BOX 713262
CHICAGO IL 60677-1262

*Please note that this address will not accept shipments from UPS, FedEx, etc.

Please return a copy of this invoice with your check payment.