

2020 Participant Order Form



Sign-up, submit your data, get **discounted results**

Order online at
salarysurveys.milliman.com

Place your order as a survey participant and save up to 50%.

Save \$75 if you sign-up before data collection begins (varies by survey, consult schedule).

CURRENT AS OF OCTOBER 2019
 PRICING SUBJECT TO CHANGE

Survey prices vary based on your company's size (number of FTE).

See 2020 Pricing & Schedule.

GENERAL SURVEYS		Save \$75 →	Early Sign-Up Price	Participant Price	Order
EXECUTIVE COMPENSATION	35 th Ed.		\$495	\$570	
MANAGEMENT & PROFESSIONAL*†	37 th Ed.		\$995*†	\$1,070*†	
ENGINEERING / SCIENTIFIC / PROJECT MANAGEMENT	5 th Ed.	FTE:<25 25-200 200+	\$395 \$695 \$995	FTE:<25 25-200 200+ \$470 \$770 \$1,070	
TECHNOLOGY	29 th Ed.	FTE:<25 25-200 200+	\$395 \$695 \$995	FTE:<25 25-200 200+ \$470 \$770 \$1,070	
NORTHWEST BENEFITS	14 th Ed.		\$995	\$1,070	
CITY/REGIONAL SURVEYS					
ALASKA COMPENSATION*	30 th Ed.		\$895*	\$970*	
PORTLAND AREA COMPENSATION (PACS)*	38 th Ed.		\$895*	\$970*	
PUGET SOUND AREA COMPENSATION*†	39 th Ed.		\$895*†	\$970*†	
SPOKANE / INLAND NORTHWEST COMPENSATION	34 th Ed.	FTE:<50 50+	\$395 \$695	FTE:<50 50+ \$470 \$770	
INDUSTRY SURVEYS					
NORTHWEST FINANCIAL INDUSTRY	42 nd Ed.	FTE:<50 50-100 100+	\$395 \$595 \$795	FTE:<50 50-100 100+ \$470 \$670 \$870	
NORTHWEST HEALTHCARE COMPENSATION	28 th Ed.	FTE:<150 150+	\$595 \$995	FTE:<150 150+ \$670 \$1,070	
▪ NW HEALTHCARE MID-YEAR HOT JOBS UPDATE‡	16 th Ed.		\$395‡	\$470‡	
NORTHWEST HEALTHCARE EXECUTIVE COMPENSATIONS§	16 th Ed.		\$495 or \$395§	\$570 or \$470§	
OREGON PUBLIC EMPLOYERS	17 th Ed.	FTE:<150 150-250 250+	\$395 \$595 \$795	FTE:<150 150-250 250+ \$470 \$670 \$870	
WASHINGTON PUBLIC EMPLOYERS	15 th Ed.	FTE:<150 150-250 250+	\$395 \$595 \$795	FTE:<150 150-250 250+ \$470 \$670 \$870	
NORTHWEST UTILITIES SALARY & WAGE	29 th Ed.		\$595	\$670	

* Trend update included in price

‡ Only available after participating in the NW Healthcare Comp. Survey

† Summary Report available for \$295 if survey participant and <150 FTE

§ Participant discount price (only if also participating in NW Healthcare Comp. Survey)

ORDER ONLINE AT SALARYSURVEYS.MILLIMAN.COM — OR — COMPLETE & SUBMIT THIS FORM (VIA EMAIL OR MAIL)

CONTACT INFORMATION FOR PARTICIPANT ORDER — ALL FIELDS REQUIRED

Name: _____ Title: _____

Company: _____ Company Size (# of FTE): _____

Address: _____
Street City State Zip

Email: _____ Phone: _____

BILLING INFORMATION - Complete if different from above

RESULTS/SHIPPING INFORMATION - If different from above

Invoice to: _____
Name email address

Name email address