



Contribute to IFAPAC in 3 EASY WAYS

Name _____

NAIFA member # _____

Company _____

Title _____

Billing Address _____

City _____

State _____ Zip _____

| CLUB LEVEL Annual Contribution | MONTHLY Contribution |
|--------------------------------------|-------------------------|
| Capitol (\$5,000) | \$410 |
| Platinum (\$2,500 to \$4,999) | \$210 |
| Gold (\$1,000 to \$2,499) | \$100 |
| Silver (\$600 to \$999) | \$50 |
| Bronze (\$300 to \$599) | \$25 |

★ *Monthly (Minimum of \$210 qualifies for Congressional Council membership)*

I'd like my contribution to go to one of the following IFAPAC funds:

- Administrative Political

Bank Account Draft

Monthly Bank Draft Amount

\$ _____ (\$10.00 minimum)

CHANGE OF ACCOUNT ONLY

Account # _____

Routing # _____

Signature _____

Date _____

PLEASE PROVIDE A VOIDED CHECK

Credit Card or Check

Monthly Credit Card Amount

\$ _____
(\$25.00 minimum)

One-time Amount

\$ _____

THIS IS A PERSONAL CARD

- Visa Master Card American Express Discover

Account # _____

Exp. Date _____ Security Code _____

Name of Card _____

Signature _____

IFAPAC MONTHLY GIVING PROGRAM AUTHORIZATION

- I agree to enroll in one of IFAPAC's monthly giving programs and do hereby authorize IFAPAC to withdraw from my account the amount specified every month. Monthly credit card withdrawals will occur on the 20th of each month, while bank drafts will occur on or about the 10th of each month. This authorization will remain in effect until revoked by me in writing and, until IFAPAC receives such notice, I agree that IFAPAC shall be fully protected in honoring such withdrawals. If any such check be dishonored, IFAPAC shall be under no liability whatsoever.

UPGRADE YOUR MONTHLY CONTRIBUTION

- I am currently enrolled in one of IFAPAC's Monthly Giving Programs and would like to **change my monthly withdrawal amount from \$ _____ to: (circle one)**

\$417 \$210 \$120 \$85 \$45 \$25 \$20 \$17 \$15 Other \$ _____

Instructions

Return form, contributions and/or voided check by:

Fax: 703-770-8151

Email: IFAPAC@naifa.org

**Mail: IFAPAC
P.O. BOX 759063
Baltimore MD 21275-9063**

Contributions to IFAPAC are voluntary and contributed to candidates for elective office. Your contributions will be divided between your state association IFAPAC and IFAPAC National, if you have directed NAIFA to do so (see reverse side). Club types listed above are merely suggestions. You can contribute more or less than the suggested amount. The amount contributed will not benefit or disadvantage you in any way. You have the right to refuse to contribute without reprisal. Corporate contributions to IFAPAC's political fund are prohibited. Contributions to IFAPAC are not deductible for federal income tax purposes. For NAIFA-Massachusetts members, the division of funds will be 60%/40% up to the state limit of \$500 per calendar year.