



Political Action Committee

# Yes, I want to help elect federal candidates who share the ABC free enterprise legislative agenda!

I am making a:

**One-Time Gift of \$** \_\_\_\_\_

- Attached is my personal check. (Payable to "ABC PAC")
- Please bill my personal credit card. The account information is listed below.
- I make the above personal pledge of financial support. Please send me an invoice.

**Monthly Gift\* of \$** \_\_\_\_\_

- I want to participate in the **ABC PAC Sustaining Member** program by making a monthly contribution. I understand that each month my future contribution will be transferred directly to ABC PAC from my account.

### Select ABC PAC badge level:

<input type="checkbox"/> <b>Leadership</b> Gold Badge One-Time: \$150 to \$499 Monthly: \$12.50 to \$41.58	<input type="checkbox"/> <b>Congressional</b> Platinum Badge One-Time: \$500 to \$999 Monthly: \$41.67 to \$83.25	<input type="checkbox"/> <b>Senatorial</b> Red Badge One-Time: \$1,000 to \$2,499 Monthly: \$83.33 to \$208.25	<input type="checkbox"/> <b>Presidential</b> Black Badge One-Time: \$2,500 to \$5,000 Monthly: \$208.33 to \$416.67
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### Please completely fill out this information, as it is required by ABC PAC and the Federal Election Commission:

Name (for badge): \_\_\_\_\_

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

Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Telephone (W): \_\_\_\_\_ (FAX): \_\_\_\_\_

ABC Chapter: \_\_\_\_\_

SAMPLE

### Payment information:

\_\_\_\_ Personal Check Enclosed (payable to "ABC PAC")

\_\_\_\_ Personal Credit Card:     Visa     Master Card     American Express

Print Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

### Please send your personal contribution: ABC PAC

440 First St. N.W. Suite 200  
Washington, DC 20001  
Phone: 202.595.1814.

Contributions to ABC PAC are not tax deductible for federal income tax purposes. Contributions to ABC PAC are for political purposes. All contributions to ABC PAC are voluntary. You may refuse to contribute without reprisal. The proposed contribution amounts are suggestions; you may choose to contribute more or less, or not at all. ABC will not favor or disadvantage anyone by reason of the amount of their contribution or their decision not to contribute. Federal law requires political committees to report the name, address, occupation and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year. Corporate donations are prohibited.

#### \* Monthly Gift Contributors

A record of my gifts will appear on my bank or credit card statement and I can increase, decrease, or suspend my giving by calling the ABC PAC at (202) 595-1814. All gifts provided to the ABC PAC originating as Automatic Clearing House transactions comply with U.S. law.

# ABC PAC Prior Authorization

Mail this form to: ABC PAC, 440 First St. N.W. Suite 200 Washington, DC 20001

Name: \_\_\_\_\_ Title: \_\_\_\_\_ ABC Chapter: \_\_\_\_\_

Company Name: \_\_\_\_\_ Email: \_\_\_\_\_

Company Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Federal law requires members to sign this prior authorization form in order for the executive or administrative personnel of the member corporation to be solicited by ABC PAC. The company may not approve a solicitation by any other trade association for these years. On behalf of my company, I hereby authorize ABC PAC to solicit voluntary contributions from the executive and administrative personnel and stockholders of my company for the following years:

ABC PAC requires that you sign below on each year that prior authorization is granted.

2014 \_\_\_\_\_ 2015 \_\_\_\_\_ 2016 \_\_\_\_\_

2017 \_\_\_\_\_ 2018 \_\_\_\_\_ 2019 \_\_\_\_\_