



MAC PAC Contribution Form

YES!

I would like to contribute to MAC PAC. Please accept my donation for:

\$100 _____

\$250 _____

\$500 _____

\$1,000 _____

Name: _____

Title: _____

Company: _____

Address: _____

E-mail: _____

Method of Payment: Personal Check Visa Master Card American Express

(Use of corporate checks and credit cards is prohibited under FEC Law)

Card Number: _____

Expiration Date: _____ CVV2/CVC2: _____

Name on card: _____

Cardholder Phone: _____

Signature: _____

I understand the political purpose of the MAC PAC and that my participation in MAC PAC is strictly voluntary. I understand that I have the right to refuse to contribute without fear of reprisal. My contributions to MAC PAC are not tax deductible as charitable contributions for federal income tax purposes. I understand that federal law requires MAC PAC to make its best effort to collect and report the name, mailing address, and occupation of individuals whose contributions exceed \$200 per calendar year.

Signature: _____ Date: _____

Please mail this form along with your contribution to:
MAC PAC
1481 Merchant Drive
Algonquin, IL 60102