

# Here's my vote for my compounding business!

## Member Information

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

## Amount and Frequency Information

Count on me for a **monthly** investment of: \$ \_\_\_\_\_/month.

Count on me for an **annual, recurring** investment of: \$ \_\_\_\_\_/year.

Count on me for a **one-time** total investment of: \$ \_\_\_\_\_

Contributions to IACP's COMP PAC are not deductible for federal income tax purposes. All contributions are voluntary, and you may refuse to contribute without reprisal. Contributions to COMP PAC are for political purposes. The guidelines are merely suggestions. You are free to invest more or less than the guidelines suggest and IACP will not favor or disadvantage you by reason of the amount contributed or the decision not to contribute.

## Payment Information

*COMP PAC may accept personal investments only; no corporate checks or credit cards.*

Enclosed is my *personal* check     Please charge my *personal* credit card

Type of Card:     VISA     MasterCard     Discover     American Express

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address (if different): \_\_\_\_\_

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

## Return Information

Return this completed investment card:

■ By mail: IACP, 100 Daingerfield Rd,  
Ste 401, Alexandria, VA 22314

■ By fax: (281) 495-0602

■ By email: Scan and send to  
iacpinfo@iacprx.org

