

JAMPac Contribution Card

PERSONAL INFORMATION:

NAME: _____

OCCUPATION: _____ EMPLOYER: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL: _____ PHONE: _____

YES! I WANT TO BE PART OF THE JAMPAC TEAM! I WOULD LIKE TO MAKE A MONTHLY CONTRIBUTION IN THE AMOUNT OF:

\$25.00 \$50.00 \$75.00 \$100.00 \$200.00 OTHER \$ _____

I PREFER TO GIVE A ONE-TIME CONTRIBUTION OF:

\$100.00 \$500.00 \$1000.00 \$2500.00 OTHER \$ _____

PAYMENT INFORMATION:

CHECK ENCLOSED (PAYABLE TO JAMPAC)

AMERICAN EXPRESS MASTERCARD VISA

CARD NUMBER: _____

EXP. DATE: _____ / _____ SECURITY CODE: _____ BILLING ZIP CODE: _____

NAME (AS IT APPEARS ON CARD): _____

SIGNATURE: _____

Is this Personal/Sole Proprietor payment? Yes No

Is this a firm credit card? Yes No

If so, please note that state law prohibits corporations from donating more than \$1,000 per year to a PAC.

Member contributions to the PAC are voluntary. Such contributions are used for political purposes. The amount shown is only a suggestion. Members may give more or less than the suggested amount. The organization will not look upon any member with favor, or disfavor, because of the amount of the contribution or a decision to make no contribution.

Contributions to the PAC are not deductible as charitable contributions for federal income tax purposes.

State law requires the PAC to collect and report the name, mailing address, occupation and employer of individuals whose contributions aggregate in excess of \$200 in a calendar year.

By selecting one of the payment options above, I am verifying that I have read and understand the PAC Restrictions above. By selecting the "Personal / Sole Proprietor Payment" option, I am verifying that I am a U.S. citizen or permanent resident alien; I am not a federal contractor; and I am making this contribution from my personal funds.

JOIN THE JAMPAC TEAM TODAY!

Mail to P.O. Box 1992, Jackson, MS 39215 • Fax to (601) 948-8633