



Victory In Politics

A Political Pledge Program for Members of the National Association of Insurance & Financial Advisors - Florida

I understand and agree to the following conditions:

I am currently a NAIFAPAC contributor at the Ambassador (\$200) level or higher & I will not reduce/eliminate my current level of contribution. NAIFA - Florida Board/state Chairs & Local Board officers/directors may participate providing they currently contribute to NAIFAPAC at the Century (\$100) level or higher & will not reduce/eliminate their current level of contribution.

The minimum pledge amount is \$100.00:

Pledges may be from a personal or business checking account. No credit card pledges. Pledges will not actually be paid to candidates unless & until they are needed. Pledges will be paid directly from the donor to a specific candidate. Donors should be aware that Florida law limits contributions from a single donor to a specific candidate at \$500. Donors retain the right to reject pledges to a specific candidate. Donors will be advised by the designated NAIFA-Florida committee that their pledges will be needed and must then be submitted within 72 hours.

NOTE:

Political contributions are not tax deductible. Consult your personal tax advisor for more information.

I, (print) _____, hereby pledge a new amount of, or renew my old pledge of (please indicate if new pledge or renewal) \$_____ to the NAIFA - Florida Legislative Affairs "Victory In Politics" political pledge program for the election cycle ending with the 20__ elections.

Check One Only:

- a) Democrat candidates only: _____
b) Republican candidates only: _____
c) NAIFA-Florida committee discretion: _____

Signature of Donor

Date of Pledge

(PLEASE COMPLETE THE INFORMATION FORM BELOW)

Advisors Political Involvement Committee

Nurturing grassroots and grasstops activity among NAIFA members is the chief responsibility of NAIFA's APIC

NAIFA-FLORIDA needs your help! We need to know if you have a relationship with any state or national legislator.

With all of the upcoming battles we have on both state and national levels, it is imperative that we have access to these policymakers. That is why we're counting on you for this all-important task.

Please designate your relationship as:

- A. Key Contact -- Campaign chairman, good friend, golf partner or hunting buddy.
B. Constituent Contact -- Campaign contributor, active in campaign, friend, neighbor, social contact, same church or synagogue.
C. Other Contact -- Contributor, constituent, casual acquaintance.

I have a relationship of: A B C (Circle One)

Legislator's Name: _____ District Number (if known): _____

(PLEASE COMPLETE THE INFORMATION FORM BELOW WITH YOUR CONTACT INFORMATION)

Name: (print) _____ Local Association _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____