



HUPAC

2000 North 14th Street, Suite 450
Arlington, VA 22201
(703) 276-3805
(703) 841-7797 (fax)

Health Underwriters Political Action Committee Contribution Form

Along with our lobbying and “grassroots activities”, HUPAC is a critical element of NAHU’s legislative program. By supporting challengers and members of Congress willing to consider our point of view, HUPAC increases the credibility and clout of our work on Capitol Hill.

HUPAC’s bipartisan donations target those candidates who demonstrate their support for a free market health care system and employer-based health insurance. We can only succeed if HUPAC has the necessary resources – contributions from you and your colleagues around the country.

There are two ways that you can make contributions to HUPAC. You can make a contribution by personal check/credit card or through our monthly bankdraft program. Through the HUPAC bankdraft program – your contribution will be spread out over the course of the year. By contributing \$10.00 a month for example, you will be contributing \$120.00 annually, thus providing a steady stream of support throughout the year.

Help HUPAC help you: *Because If You Won’t – Who Will?*

_____ I want to make a \$_____ contribution to HUPAC by check / credit card
(please circle one)

_____ I want to make a \$_____ monthly contribution to HUPAC by bankdraft: *(Please include a copy of a voided check with this form.)*

Bankdraft Authorization Agreement

I (we) hereby authorize HUPAC to initiate debit entries to my (our) account named at the bank below, hereinafter called BANK. This authority is to remain in full force and effect until BANK has received written notification from me (or either of us) of its termination in such time and in such manner as to afford BANK at least 3 days prior to the scheduled for charging the account. A customer also has the right to question BANK about any debit entry by notifying BANK no less than 60 days after BANK sends a statement to customer containing the entry. BANK will handle all such questions in accordance with its procedures and the requirements for resolving errors found in Regulation E issued by the Federal Reserve Board.

Name (as it appears on the check/credit card)

Signature

Credit Card Account Number

Visa/Mastercard/Amex

Exp. Date

Donations Must Be Made From Personal Accounts Only
No Corporate or Business Checks or Credit Cards Accepted

Please complete this form and send payment to:

NAHU-HUPAC
C/O Tom Bruderle
2000 North 14th Street, Suite 450
Arlington, VA 22201
Phone - (703) 276-3805 Fax – (703) 841-7797 Email – tbruderle@nahu.org

Contributions are NOT tax deductible for federal income tax purposes.