

Contribution Form

Please consider making a donation today. Any amount will help in our advocacy efforts. Contributions can be made online via credit card by visiting bit.ly/NCHCFA-PAC. Checks can be made payable to NCHCFA/PAC, 6325 Falls of Neuse Rd, Suite 35-259, Raleigh, NC 27615. Only personal funds can be accepted.

Contribution Details

Count on me! I will contribute the following amount: \$ _____

I elect to pay by:

☐ Personal credit or debit card

☐ Personal Check # _____

Please make checks payable to NCHCFA/PAC
and mail to: 6325 Falls of Neuse Rd., Suite 35-259
Raleigh, NC 27615.

Optional: automatic draft personal credit / debit card:

Draft amount: \$ _____

Preferred draft schedule:

☐ Monthly

☐ Quarterly

☐ I **do not** wish to have my name listed in NCHCFA/PAC publications as a contributor.

Credit or Debit Card Information

Card No: _____ Exp. Date: _____ CVV: _____

Signature _____ Date: _____

Personal Information

Printed Name: _____

Street: _____

Address information must match billing address on card if paying with credit or debit card.

City / State / Zip: _____

Email: _____ Phone: _____

Occupation: _____

Employer: _____