

# SDADA PAC (POLITICAL ACTION COMMITTEE) CONTRIBUTION PLEDGE FORM

Yes, I want to get involved. I believe we need to have a voice in government.

**\$250** Governor's Club    
  **\$150** Lt. Governor's Club    
  **\$100** Capitol Club    
  **\$50** Legislative Club    
 \$\_\_\_\_\_ Other

Printed Name \_\_\_\_\_

Dealership \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Please mark me down for an annual contribution at the level marked above

SDADA PAC ACCEPTS CASH, PERSONAL OR CORPORATE CHECKS AND/OR PERSONAL OR CORPORATE CREDIT CARDS

Check Box:	<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	Bill Me:	<input type="checkbox"/> Annually	\$ _____
	<input type="checkbox"/> DISCOVER	<input type="checkbox"/> AMERICAN EXPRESS		<input type="checkbox"/> Semi-Annually	\$ _____
				<input type="checkbox"/> Quarterly	\$ _____

Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_ CVV# \_\_\_\_\_