

Contributions to VCDL Political Action Committee (VCDL-PAC)

Amount of contribution: \$ _____ Once: _____ Monthly: _____ Annually: _____

Full Name: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Phone (Optional): _____ Email (Optional): _____

(Phone and email help us resolve any questions that may arise about the contribution.)

Occupation: _____

Employer: _____

Place of Employment (City & State): _____

WHAT INFORMATION IS VCDL-PAC REQUIRED TO COLLECT? Virginia state law requires the PAC to collect certain information about donors. The law requires the following items:

Your name, address, occupation, employer and your employer's principle place of business.

Some helpful hints: Your occupation would be what you do, not your job title. Your current occupation can be student, homemaker or retired. Business owners may put "entrepreneur" as occupation, and the name of their company as employer.

WHAT DO YOU DO WITH THIS INFORMATION? State law requires the VCDL-PAC to report ALL contributions to the Virginia State Board of Elections (SBE). However, your information is NOT made public unless your contributions total MORE THAN \$100.00 in a calendar year. We do not sell your name to any organization. Your information is kept within the VCDL-PAC and reported as required by law.

- Virginia law prohibits any PAC from accepting anonymous contributions. By law, any anonymous contributions must be turned over to a qualified charity.
- Federal law prohibits any foreign national from contributing, donating, or spending funds in connection with any federal, state, or local election in the United States, either directly or indirectly. Therefore, VCDL-PAC cannot accept any contributions from foreign nationals.
- Contributions or gifts to VCDL-PAC are not deductible for Federal income tax purposes.

Make check payable to: **VCDL-PAC**
Mail to:
VCDL-PAC
c/o VCDL Membership Processing Center
PO Box 5752
Fredericksburg, VA 22403

Payment Method:

_____ Check (enclosed)

_____ Credit/Debit

_____ Cash (in person)
Do not mail cash!

To pay with card please complete the following:

Card Number

Expiration Date

CVV

Name as it appears on the card

Signature of cardholder