



Yes, I realize how important it is to protect the interests of the CPA profession in New Jersey and I want to support the NJ-CPA-PAC.

Enclosed is a contribution of \$50 \$100 \$150 Other _____

New Jersey CPA Political Action Committee
 105 Eisenhower Parkway, Suite 300
 Roseland, NJ 07068
 973-226-4494

State law requires that the NJ-CPA-PAC use its best efforts to collect the name, address, occupation and name of employer for each contributor. If you have any questions about this form, please contact Jeff Kaszerman at 862-702-5610, or jkaszerman@njcpa.org.

Please type or print clearly:

Contributor's Name _____ Contributor's Occupation _____
 Home Address _____ Employer's Name _____
 City _____ State _____ Zip _____ Employer Address _____
 Date _____ City _____ State _____ Zip _____

Make check payable to NJ-CPA-PAC and mail to NJ-CPA-PAC, 105 Eisenhower Parkway, Suite 300, Roseland, NJ 07068.

•••• PERSONAL CHECKS PREFERRED ••••

It is much simpler for the NJ-CPA-PAC to comply with election law reporting requirements when a personal check is submitted. If you use a personal check, provide the information above. If you are paying with a company check, complete the appropriate section below.

To contribute via credit card, please go to njcpa.org/pac.

For checks issued from a business or other entity, please complete the following information.

Please indicate the type of business the check is drawn from:

<input type="checkbox"/> Sole Proprietor Complete box A below	<input type="checkbox"/> Corporation <input type="checkbox"/> PA <input type="checkbox"/> PC Complete box B below	<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> LLP Complete box C below
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Please note that the following types of businesses are prohibited from making a contribution: banks, insurance corporations, public utilities, cable television corporations and casinos. If the checking account is from any of these types of companies, you must use a personal check instead.

A If check is from a sole proprietorship, print and sign the name of the sole proprietor. Maximum contribution is \$7,200.

Print _____
 Sign _____

B If the check is from a corporation, PA or PC, provide the following information. Maximum contribution is \$7,200.

Company Name _____
 Address _____
 City _____ State _____ Zip _____

C Partnerships, LLCs and LLPs: A contribution drawn on the account of a partnership, LLP or LLC must be signed by a partner(s) or member(s) and is considered a contribution from the partner/member who has signed the check. If the signer of the check intends to attribute a portion of the contribution to a non-signing partner or member, then the following written information for each partner must be submitted. The maximum contribution per partner is \$7,200.

Partner's Name	Signature	Amt. to Allocate	Home Address
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____