

Automotive Aftermarket Political Action Committee



STEP ONE: APPROVAL TO SOLICIT POLITICAL CONTRIBUTIONS

I hereby authorize the Automotive Aftermarket Political Action Committee (AAPAC) to solicit voluntary, personal contributions as specified below during the calendar year indicated below. I certify that my company is a current member of AAIA and that my company cannot authorize any other national trade association to solicit political contributions for federal candidates from our "Restricted Class" (executive and administrative personnel). Further, I understand that approval to solicit does not in any way obligate me or my employees to contribute to AAPAC.

Name _____ Title _____

Company _____

Company Address _____

City/State/Zip _____

Telephone _____ Fax _____

E-mail Address _____

As specified below, "Restricted Class" means the executive and administrative personnel of company named above.

Approval is hereby granted for AAPAC to solicit my company's "Restricted Class" for the current year.

Approval is hereby granted for AAPAC to solicit me, but not anyone else in the "Restricted Class."

Approval is hereby granted for AAPAC to solicit me and the following listed employees, but you may not solicit anyone else in the "Restricted Class":

Name: _____ E-mail: _____

Name: _____ E-mail: _____

Name: _____ E-mail: _____

Name: _____ E-mail: _____

Authorized Signature for 2012: _____

Fax to 301-654-3299, or mail to:

Automotive Aftermarket Industry Association

c/o David Pinkham

7101 Wisconsin Ave., Suite 1300, Bethesda, MD 20814

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STEP TWO: AAPAC CONTRIBUTION FORM

Yes, I support the efforts of AAPAC on behalf of the automotive aftermarket and wish to make the voluntary, personal donation indicated below. I understand that my donation will be used to support the election of pro-aftermarket candidates for the U.S. Congress (House or Senate).

Please provide the following information:

Name _____ Occupation _____

Company _____

Company Address _____

City/State/Zip _____

Telephone _____ Fax _____

E-mail Address _____

Suggested Contribution Levels:

\$365 AAPAC 365 CLUB \$100 \$200 \$300 \$500 \$1,000

\$2,500 \$5,000 (maximum allowable annual contribution) Other \$ _____

Choose the preferred method of payment:

My *personal* check made payable to AAPAC is enclosed

Charge to my *personal* credit card: VISA MasterCard American Express

Account Name _____

Account Number _____ Expiration Date _____

Signature _____ Date _____

Important information for contributors: Your donation must be by personal check or personal credit card. Corporate donations cannot be accepted and will be returned. Donations to AAPAC are not deductible as charitable contributions. The amounts listed above are suggestions only, an individual is free to contribute more or less than the suggested amounts, but may not contribute more than \$5,000 in aggregate to AAPAC in one calendar year. Federal law requires AAPAC to report the name, occupation, mailing address, and name of employer for any individual whose total contributions exceed \$200 in a calendar year.

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