## NIADA-PAC POLITICAL ACTION COMMITTEE

NIADA-PAC is the Politcal Action Commitee of the Natonal Independent Automobile Dealers Associaton. NIADA-PAC may only make politcal contributons to candidates for federal office.

Federal law requires NIADA-PAC to obtain writen authorizaton from a member of NIADA prior to solicitng contributons to NIADA-PAC. This requirement applies to solicitatons conducted via mail, electronic mail, and solicitatons made during meetngs and conventons.

The NIADA-PAC requests your approval to solicit contributions to the NIADA-PAC and offers the attached form which authorizes us to solicit personal contributons to the NIADA-PAC from you.

Completing this authorizaton does not obligate you in any way to support or contribute to the NIADA-PAC, it simply allows NIADA-PAC to discuss fundraising efforts with you.



NATIONAL INDEPENDENT AUTOMOBILE DEALERS ASSOCIATION

# **Do Your Part.**

Donate To The NIADA Pac. Scan The QR Code



POLITICAL ACTION COMMITTEE

Or visit niada.Com/advocacy to donate online or complete this form and mail it, including check or credit information to: 4621 S. Cooper Street, Suite 131-524 Arlington, TX 76017

POLITICAL ACTION COMMITTEE

### THE LEADING VOICE OF THE USED AUTO INDUSTRY

The independent auto dealer is uniquely impacted by federal and state legislation. The National Independent Automobile Dealer Association (NIADA) effectively confronts the challenging issues that disrupt the used auto industry's ability to create jobs, build thriving dealerships and maximize profitability. The NIADA PAC is a long-established, influential and highly effective advocate for independent automobile dealers at all levels of government.

A critical part of advocacy includes supporting candidates for elected office who champion legislation that benefits the industry and keeps the economic engine of your small business running strong.

A campaign that effectively disseminates the best candidate's message to the electorate costs money.

The NIADA-PAC was established to financially support candidates that share our vision for the future of the independent dealer and who will continue to fight for your livelihood. Your contributions extend our reach, efficacy and influence. Any amount is appreciated.



To donate, scan the QR code on the back of the brochure or complete this form and mail it, including check or credit card information to: 4621 S Cooper Street, Suite 131-524, Arlington, TX 76017

Federal law requires that NIADA has this form on file in order to solicit for contributons to the NIADA-PAC. Signing this form does not obligate you in any way to contribute.

Only complete and submit this form if:

You are (or your company is) a member or associate member of NIADA.

You are empowered by your company to authorize NIADA-PAC to distribute solicitatons for contributons to other executves/ employees of your company.

#### NIADA-PAC

APPROVAL FOR SOLICITATION

(PLEASE PRINT)

#### Corporate Name of Company

#### Name of Authorized Representatve

I, hereby give approval for solicitaton of certain of its em-ployees to contribute to NIADA-PAC, the politcal acton fund of Natonal Independent Automobile Dealers Association, a trade associaton of which Company is a member or associate member. Contributons to the NIADA-PAC are voluntary; no one will benefit or be disadvantaged by the amount contributed or by a decision not contribute. Federal law requires disclosure to the FEC of name, address, employer, and occupaton. Contributons to NIADA-PAC are not deductble for federal income tax purposes and must be made personally (no corporate or company contributions).

Date

#### FOR CALENDAR YEAR 2022:

Authorized Representative Date

#### FOR CALENDAR YEAR 2023:

Authorized Representative Date

FOR CALENDAR YEAR 2024:

Authorized Representative

#### FOR CALENDAR YEAR 2025:

Authorized Representative Date

Yes, I understand that the purpose of NIADA-PAC is to promote the interests of the independent automobile industry and that my contributon(s) will be used for a politcal purpose.

First Name	M.I.	Last Name	
Occpation/Title			
Employer			
Business Address			
City		State	Zip
Email Address		Phone	
Home Address			

# I WISH TO CONTRIBUTE THE FOLLOWING AMOUNT TO THE NIADA-PAC

□ \$25 □ \$50 □ \$100 □ \$250 □ \$500 □ Other □ \$1000 □ \$1500 □ \$2000 □ \$2500 □ \$5000

#### **PAYMENT INFORMATION**

Check: Enclosed is my personal check payable to niada-pac
Credit: One-time contribution charged to my personal credit card
Credit: Recurring, monthly contribution charged to my personal credit card

Card Holder Name	Exp. Date
Card Number	 CVV #
Credit Card Billing Address (if different)	
Credit Card Billing Address (if different) Address	 

Mail completed form to: 4621 S. Cooper Street, Suite 131-524 Arlington, TX 76017