



**AMERICAN HELLENIC EDUCATIONAL  
PROGRESSIVE ASSOCIATION  
POLITICAL ACTION COMMITTEE  
(AHEPA PAC)**

## DONATION FORM

The American Hellenic Educational Progressive Association Political Action Committee (AHEPA PAC) was created by the American Hellenic Educational Progressive Association to enhance its leadership on behalf of the entire American Hellenic community by supporting the election of candidates to federal elective office who appreciate a strong American Hellenic community and the mission of AHEPA.

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Employer Address \_\_\_\_\_

Enclosed is my personal check, made payable to **AHEPA PAC** for \$ \_\_\_\_\_

I authorize AHEPA PAC to charge my personal credit card in the amount of \$ \_\_\_\_\_

Name as Appears on Card: \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

Street

City

State

Zip

Type of Card (circle):            American Express            Visa            MasterCard

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

**Your PAC contributions must meet the following Federal requirements:**

1. My contribution is voluntary.
2. I understand my donation is not tax deductible.
3. I know that I may decline to contribute without any reprisal.
4. I realize that AHEPA PAC funds will be used for political purposes as determined by its officers.
5. I am a U.S. citizen.
6. My aggregate contributions during this calendar year do not exceed \$5,000 to AHEPA PAC (or \$115,500 biannually for all federal elections).

*A copy of the AHEPA PAC report is filed with and can be obtained from the Federal Election Commission.*

***Your signature denotes you have read and agree with the Federal requirements stated above.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return this completed Donation Form with a check made payable to "AHEPA PAC" to:**  
Comerica Bank – PAC Services | MC 2250 | P.O. Box 75000 | Detroit, MI 48275