



CRMCA South Carolina Political Action Committee

Frequently Asked Questions

Q: Can I send a Company Check or use a Company Credit Card?

A: For PAC's in South Carolina (like this one) the answer is "YES." Corporate contributions are allowed in South Carolina.

Q: How much am I personally allowed to contribute?

A: Per SC law, there is no maximum for contributions made by individuals or corporations in SC.

Please complete the form below that contains information required to process your contribution and return with your form of payment. Payment may be made either by check or credit card and form of payment may be personal or company. You also may contribute under the ADVOCACY section of our website at www.crmca.com. Your contribution will be used to elect and support public officials who understand the issues facing our industry. Your investment in our industry is greatly appreciated!

Select Personal Contribution Level:

- | | |
|--|---|
| <input type="checkbox"/> Capitol Club - \$2500 | <input type="checkbox"/> Supporter - \$250 |
| <input type="checkbox"/> President's Circle - \$1000 | <input type="checkbox"/> Friend - \$100 |
| <input type="checkbox"/> Patron - \$500 | <input type="checkbox"/> Other Amount _____ |

In 2017 Individuals contributing to the SC PAC will be recognized by level on the CRMCA Website, at various annual events and on name tags. We know that your support makes our efforts successful and we look forward to recognizing your investment this year! All contributions made during the year including Raffles will be counted towards your contribution level.

Payment Method is by:

- Check for \$ _____
(Payable to "CRMCA SC PAC")
- Credit Card for \$ _____

Please mail contributions to:

CRMCA SC PAC
PO Box 480310
Charlotte, NC 28269

Please select the type of contribution: Individual Company

Please list the name for recognition purposes: _____
(Individual or Company that should receive recognition)

Full Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Employer Company Name: _____

Occupation/Title: _____

Complete credit card info for payment or visit www.crmca.com/advocacy to pay online

Credit Card #: _____

Expiration Date: _____ 3 Digit Code on Back: _____

Cardholder Name: _____

Signature: _____ Date: _____