



# NABIPMI PAC Donation Form

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME CITY: \_\_\_\_\_ HOME STATE \_\_\_\_\_ HOME ZIP \_\_\_\_\_

PHONE: \_\_\_\_\_ Email: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

EMPLOYER ADDRESS: \_\_\_\_\_

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AMOUNT ENCLOSED: \_\_\_\_\_

***Please note:***

**Corporate contributions are prohibited. Personal checks only.**

Mail your completed form and check to:

NABIPMI PAC

101 S. Washington Square, Suite 900

Lansing, MI 48933

Questions? Contact us at [nabipmichigan@gmail.com](mailto:nabipmichigan@gmail.com)