

2019 Federal Contribution Form

Yes, I wish to make a contribution of:

Amount

- ☐ Presidents' Club Platinum Level (\$5,000)
- ☐ Presidents' Club Gold Level (\$2,000)
- ☐ Presidents' Club (\$1,500)
- ☐ Leadership Board Challenge (\$850)
- ☐ Golden State Club (\$500)
- ☐ Other (\$ _____)

Recurrence

Pledges must be paid in full by **December 31**

- ☐ One-time ☐ Monthly ☐ Quarterly ☐ Payroll (association staff)
- ☐ **NEW 2019! Please sign me up for the Quarterly CHPAC Newsletter and use the following email address:**

Personal Information

Federal law requires this information accompany all contributions:

- ☐ I am currently an employee at the hospital listed below.
- ☐ I am paid on a salary (not hourly basis) and perform executive or administrative duties (e.g. policymaking, managerial, professional or supervisory responsibilities) or am a member of a recognized profession (e.g. physician, nurse, accountant).
- ☐ I am not represented by a union.

Name: _____

Occupation/Title: _____

Full Name of Employer: _____

Physical Address: _____

City: _____

State: _____

Zip: _____

Telephone: _____

Email: _____

Payment Information

- ☐ Check enclosed. Make payable to CHPAC-FED
- ☐ Billing address same as Personal Address
- ☐ I verify that this is a personal donation for which I will not be reimbursed by my employer or any other entity

Name on Card: _____

Card Number: _____

Expiration Date: _____

CVV Number: _____

Billing Address: _____

City: _____

State: _____

Zip: _____

CHPAC Goal Credit

- Name of Hospital(s), System or Regional Association to receive credit: _____
- Name of CHA Center, Committee or Workgroup to receive credit: _____
- Please give recognition to my Professional Organization:
 - ☐ ACNL ☐ CSHE ☐ Volunteers



QUALITY HEALTH CARE FOR CALIFORNIANS

Federal PAC Guidelines for Contributing to CHPAC-FED

The purpose of CHPAC-FED is to support the election of candidates to the U.S. House of Representatives and U.S. Senate who recognize the vital role of hospitals.

Contributions or gifts to CHPAC are completely voluntary and not deductible as charitable contributions for federal or state income tax purposes.

Contribution levels are suggestions — you may contribute more or less. You have the right to refuse to contribute to CHPAC-FED without reprisal. The decision to participate will in no way affect your employment or job status.

CHPAC-FED may accept contributions from individuals up to \$5,000 per calendar year.

CHPAC-FED is prohibited by federal law from accepting contributions from corporations, labor unions, federally chartered corporations, federal government contractors, foreign nationals and persons who are not members of the solicitable class.

CHPAC-FED may solicit only individuals who are officers, directors, shareholders or management employees of member corporations and their families. As an officer, director, shareholder or management employee of a member corporation or a family member of such persons, please complete the required contributor information.

CHPAC-FED will not accept any contribution until it has confirmed that the contributor is a member of the CHPAC-FED solicitable class. Any contributions received from persons who are not members of the CHPAC-FED solicitable class will be transferred to the CHPAC state account.

Paid for by California Hospitals Political Action Committee (Federal)
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