



**NCDPAC**

**New Car Dealer  
Political Action Committee  
P.O. Box 960491  
Boston, MA 02196**

**MEMBER'S INVOICE  
POLITICAL ACTION ASSESSMENT STATEMENT**

**YES, I want to help support our state legislative agenda and help elect legislators who support our MSADA! Enclosed is my contribution.**

**Sign me up as a...**

- GOLD STAR SUPPORTER** **\$500.00**
- SILVER STAR SUPPORTER** **\$400.00**
- BRONZE STAR SUPPORTER** **\$300.00**
- OTHER \$** \_\_\_\_\_

**Fill this invoice out and fax to MSADA at (617) 451-9309 OR mail it to:**

**NCDPAC  
P.O. Box 960491  
Boston, MA 02196**

*State law prohibits corporate contributions. All checks and credit cards must be personal.*

\_\_\_\_\_ **Please bill my *personal credit card* account:**

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

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

**Name of Dealership:** \_\_\_\_\_

**Credit Card:** Visa \_\_\_ MasterCard \_\_\_ American Express \_\_\_

**Name on Card:** \_\_\_\_\_

**Card #:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

\_\_\_\_\_ **I have enclosed my *personal check* made out to "NCDPAC".**