

Dear MFPE Retired member:

For just a few dollars a month,
YOU can make a difference!

We need your help. MFPE is asking each member to donate \$2 a month for MFPE PAC* and a \$1 a month for NEA FCPE/AFT COPE.** It's an excellent investment in your future! Please take a stand for public schools and public services. **THANK YOU!**

YES! I want to be part of MFPE's ongoing political education efforts on behalf of public education and public services by supporting good candidates and ballot issues.



Enclosed is:

- my one-time check, made out to MFPE PAC for the amount below.
- my check, made out to MFPE PAC, with my pledge to send a check every year.
- bank draft authorization (on back of this form) to automatically transfer the amount below to MFPE PAC through monthly payments.

MFPE PAC* \$ _____ per month (\$2 suggested)

NEA FCPE/AFT COPE** \$ _____ per month (\$1 suggested)

YOUR LOCAL PAC*** \$ _____ per month (\$1 suggested)

Date _____ Signature _____

Name (Print please) _____

Home Address _____

Local MFPE Affiliate _____

Home Phone _____ Cell Phone _____

Email Address _____

PLEASE RETURN THIS FORM TO YOUR MFPE • THANK YOU!

Contributions to NEA FCPE/AFT-COPE and MFPE Political Action Committee and Ballot Initiative Fund are voluntary and are not a condition of membership in MFPE or any of its affiliates. PAC contributions are not deductible as charitable contributions for federal income tax purposes. Only US citizens or lawful permanent residents may contribute. State and Federal law prohibit us from receiving donations from persons other than members of MFPE and its affiliates, and their immediate families. All donations from persons other than members of MFPE and its affiliates, and their immediate families, will be returned.

MFPE PAC, 1232 East 6th Avenue, Helena, MT 59601

* MFPE PAC: Political Action Committee

** NEA FCPE: Friends of Children & Public Education AFT COPE: Committee on Political Education

*** Several MFPE local affiliates have their own Political Action Committees



MFPE PAC

AUTHORIZATION AGREEMENT FOR PREARRANGED PAYMENT OF PAC CONTRIBUTION

1232 East 6th Avenue, Helena, MT 59601



Authorization Agreement for Electronic Funds Transfer (EFT)

I (we) hereby authorize MFPE to initiate debit entries to my (our) checking account indicated below and the bank named below, hereinafter, called BANK, to debit the same to such account. I (we) will not hold our BANK liable for any erroneous debits made by MFPE.

Name of Bank Customer (Exactly as checks are signed)	Your Account Number
Full Name of Bank	Bank Routing Number (9 digits)
Bank Address, City, State, Zip	

Date completed	Sign as you sign your checks
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Member Information

Address	Local Name
City, ST, Zip	Local #
Home/Cell Phone	Home Email

MFPE PAC* \$_____ per month (\$2 suggested)
NEA FCPE/AFT COPE** \$_____ per month (\$1 suggested)
YOUR LOCAL PAC*** \$_____ per month (\$1 suggested)

Deductions will be made on the 10th day of each month

This authorization is to remain in full force and effect until cancellation by either the bank customer, MFPE, or both. All amounts paid are non-refundable and non-transferable.

Attach voided check here: This authorization will not be accepted unless a voided personal check is attached



*Together we can build
a brighter Montana future!*

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** NEA FCPE: Friends of Children & Public Education and
AFT COPE: Committee on Political Education

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