

**Pennsylvania Orthopaedic Society
Political Action Committee (OrthoPAC)**

510 North Third Street • Harrisburg, PA 17101-1111
(717) 909-8901 • (888) 772-7900



ORTHOPAC CONTRIBUTION FORM

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

Payment Method

Personal Check (*made payable to OrthoPAC*) Visa (*non-corporate*) Mastercard (*non-corporate*)

PLEASE COMPLETE:

CREDIT CARD No.: _____

CARD HOLDER NAME: _____

EXPIRATION DATE: _____

CV2# (3-digit # on back of card): _____

I authorize The Pennsylvania Orthopaedic Society / OrthoPAC to charge my credit card:

Monthly Contribution: \$30 \$42 \$84 \$125
 Lump-Sum Contribution: \$360 \$500 \$1,000 \$1,500
 Other Contribution Amount: _____

Signature: _____

Date: _____

Tax Information

***NOTE:** Campaign Expense Reporting Law prohibits acceptance of corporate contributions to political action committees. OrthoPAC contributions are not deductible as charitable contributions for federal income tax purposes. Funds received by the OrthoPAC are used exclusively for campaign contributions and to support the administrative costs of the OrthoPAC.

Questions regarding political contributions, please call 888/772-7900 or 717/909-8901.

**Please complete and fax back to 717/909-8906 or
Mail to: Pennsylvania Orthopaedic Society
510 North Third Street, 3rd Floor
Harrisburg, PA 17101-1111**