

ProFirePAC

PROFESSIONAL FIREFIGHTERS ASSOCIATION OF NEW JERSEY
IAFF, AFL-CIO
Political Action & Education Committee

INDIVIDUAL VOLUNTARY CONTRIBUTION FORM

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

City/Fire District: _____

IAFF Local Name/Number: _____

Day Telephone: _____ / _____

Night Telephone: _____ / _____

E-mail: _____

Donation Amount (check applicable): \$20. _____ \$50. _____ \$75 _____ \$100. _____

Individual voluntary contributions to ProFirePAC must be made by personal check or money order payable to ProFirePAC / Contributions are not tax deductible.

Mail to:
ProFirePAC
Professional Firefighters Association of New Jersey
24 West Lafayette Street Trenton, NJ 08608