



FIADA PAC CONTRIBUTION FORM

INDEPENDENT DEALERS UNITE!

Your PAC contribution helps spread awareness and gain support of issues affecting independent dealers in the state's capitol.

Contributor Information:

Contributor's Name _____

Dealership _____

Street Address, City, State, Zip _____

Contribution Information:

Check Credit Card (one time contribution) Monthly Credit Card Contribution (until I cancel)

\$500 \$250 \$100 \$50 \$25 _____

Credit Card Information:

Name on Card _____ Card Number _____

Exp Date _____ Sec Code _____ Billing Phone _____

Billing Address, City, State, Zip _____

Authorized Signature _____

Please mail your contribution to

FIADA
1840 Fiddler Court
Tallahassee, FL 32308

If making payment via credit card, you may fax your contribution form to **850-385-3251**.