

**CONTACT INFORMATION**

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

*Federal law requires members to sign the bottom portion of this form in order for the executives, administrative personnel and directors of member corporations to be solicited by ICBA PAC. The company/bank may not approve a solicitation by another federal trade association for these years. I hereby authorize ICBA PAC to solicit voluntary contributions from the executives, administrative personnel and directors of my company/bank for the following years. Please note that ICBA PAC will not solicit your employees or directors without your additional written consent.*

2025 \_\_\_\_\_

2026 \_\_\_\_\_

2027 \_\_\_\_\_

2028 \_\_\_\_\_

2029 \_\_\_\_\_

**RETURN FORM TO:** ICBA PAC  
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Suite 500 East  
Washington, DC 20005