



YES! I want to pledge my financial support to the Ohio Grocers Food PAC.

★ \$25 ★ \$50 ★ \$100 ★ \$250 ★ \$500 ★ \$1000 ★ Other: \$ _____

I pledge this amount for: ★ 1 year ★ 3 years ★ 5 years

Name

Home Address

City, State, ZIP

Phone Number

Email

Bill Me

Check Enclosed Make *personal checks* payable to: **Ohio Food PAC**
Mail to: **Ohio Grocers Association**
1335 Dublin Road, Suite 30A
Columbus, OH 43215

Charge My Credit Card VISA MasterCard AMEX

Account #

Expiration Date

Security Code

Name

Signature



Regulations dictate that only **PERSONAL CHECKS, CASH** or **CREDIT CARDS** are acceptable for PAC funds.
Ohio law requires us to collect and report the name, home address, and employer of individuals who contribute to the Ohio Food PAC.