

NAIOP

SAN DIEGO CHAPTER



POLITICAL ACTION COMMITTEE

CONTRIBUTOR INFORMATION

All of the following requested information is **required** pursuant to disclosure requirements:

Full Name: _____

Street Address (no PO Box):

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

ALSO REQUIRED: Please check and complete ALL that apply. You may have to check and answer multiple boxes.

☐

Contributor is an individual:

Employer (if self-employed, list name of business): _____

Occupation: _____

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Contributor is a Limited Liability Company:

Name & Title of CEO, CFO, COO, ED, Board Chair, President, or VP with decision-making authority over the contribution:

Contributions are not tax-deductible. The committee may accept contributions of any amount from individuals, corporations, labor unions, PACs, etc., but may not accept contributions from foreign nationals. The committee also may not deposit your check without the information requested above, and may not accept cash, cashier's checks or money orders of \$100 or more. Contributors must make contributions with their own funds and not from funds provided by another person for the purpose of making the contribution unless the true source is disclosed to the committee.

The PAC does not accept contributions which are earmarked for a specific candidate. Contributions to the PAC will not trigger the disqualification rule under Government Code section 84308.

Ad Paid for by NAIOP San Diego PAC

Questions:

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