



Donation Form

Contribution Information

Enclosed is my MPT-PAC contribution of:

___\$2500 ___\$1,000 ___\$500 ___\$250 ___\$100 ___\$50 _____Other

Please make checks payable to MPT-PAC.

_____ Check enclosed for the full amount.

_____ I would like to pay in _____ monthly installments of _____ by check. My first check is enclosed.

Donor Information (required by State Law)

Name _____
Billing address _____
City, State Zip Code _____
Email _____

Employer Information (required by State Law)

Name _____
Address _____
City, State Zip Code _____

Signature: _____

I certify that I am a United States Citizen or a Permanent Resident

Mail to: MPT-PAC | 124 West Allegan Street, Suite 1900 | Lansing, MI 48933

Contributions to PT-PAC are not tax deductible as charitable contributions. Contributions are voluntary. The amount given by the contributor, or the refusal to give, will not benefit or disadvantage the person being solicited. The suggested amount is only a suggestion. More or less than the suggested amount may be given.