

**New Jersey Anesthesia PAC (NJAPAC) Contribution Form**

**Please accept my one-time contribution in the amount of:**

- \$100**
- \$250**
- \$500**
- \$ \_\_\_\_\_ (other amount)**

**Make checks payable to NJAPAC and mail to: NJAPAC**  
150 West State Street, Suite 110 Trenton,  
New Jersey 08608

Name \_\_\_\_\_ Amount \$ \_\_\_\_\_

Home Address \_\_\_\_\_

Employer \_\_\_\_\_

Employer Address \_\_\_\_\_

Occupation \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Signature (not valid without signature) \_\_\_\_\_

**Mail this COMPLETED form (both sides) along with your check to:**  
**NJAPAC**  
**150 West State Street, Suite 110**  
**Trenton, NJ 08608**

**Please consider making your donation a recurring one by  
processing your donation through the online portal on the NJAPAC  
website – [www.njapac.org](http://www.njapac.org)**

**BOTH SIDES OF THIS FORM MUST BE COMPLETED IF APPLICABLE**

**Individual contributions and their contributions as a corporate officer/contributing partner may not exceed a total of \$14,400 per year.**

**For contributions drawn on joint personal accounts** - Contributions drawn on joint accounts will be allocated to the individual whose signature appears on the check. Joint account checks can be allocated to multiple accountholders. In such case, joint account checks will be allocated equally to those joint accountholders whose names and signatures appear on the check.

**For contributions drawn on non-personal accounts** - Please mark the correct selection below and provide information as requested.

This contribution is drawn on the account of a:

       **Sole proprietorship. You are limited to \$14,400 per year.**

The name of the sole proprietor is \_\_\_\_\_.

       **Partnership. As a partner and individual donor your total may not exceed \$14,400 per year.** Checks must be signed by the contributing partner(s). Alternatively, a separate sheet that lists the name(s) of the partner(s) to whom the contribution is being attributed, the amount contributed by the listed partner(s), and bears the signature(s) of the contributing partner(s) may be submitted with a contribution check.

       **LLC. Choose one:**

This LLC is NOT treated as a corporation for tax purposes. (On a separate sheet, list the name(s) of the member(s) of the LLC to whom the contribution is being attributed and identify the amount contributed by the listed member(s) and provide the signature(s) of the contributing member(s).) **As an LLC officer and individual donor your total may not exceed \$14,400 per year.**

This LLC is treated as a corporation for tax purposes. (The LLC will be reported as a corporate contributor.) **This LLC is limited to \$14,400 per year and separately, as an individual your personal contribution total is limited to \$14,400 per year.**

       **Corporation. Your corporation is limited to \$14,400 per year and separately, as an individual your personal contribution total is limited to \$14,400 per year.**

• Federal law prohibits NJAPAC from accepting contributions from foreign nationals. Individuals who have permanent U.S. residency (green cards) may contribute, however. State law prohibits NJAPAC from accepting contributions from banks, insurance companies, public utilities, cable television companies, and any majority shareholder in such entities. State law (The Casino Control Act – NJSA 5:12-138) prohibits NJAPAC from accepting contributions from companies that hold or are applicants for a casino license, including any holding company or subsidiary of a casino licensee or applicant. Contributions from officers, directors, and key employees of any such company are prohibited. In addition, contributions by members of the New Jersey Casino Control Commission and its employees are barred. **It is illegal to reimburse any individual for a contribution to NJAPAC. It is illegal to receive a reimbursement for any contribution to NJAPAC. Contributions or gifts to NJAPAC are not tax-deductible.**

