



Monthly Bank Draft - UPGRADE

| CLUB TYPE | ANNUAL CONTRIBUTION | MONTHLY BANK DRAFT |
|------------|---------------------|---------------------------------------|
| Capitol | \$5,000 | \$416.00/month |
| Emissary | \$2,500 to \$4,999 | \$210.00/month |
| Diplomat | \$1,000 to \$2,499 | \$84.00/month |
| Envoy | \$500 to \$999 | \$42.00/month |
| Statesman | \$300 to \$499 | \$25.00/month |
| Ambassador | \$200 to \$299 | \$17.00/month |
| Century | \$100 to \$199 | \$8.50/month |
| Investor | \$50 to \$99 | \$5.00/month (minimum for bank draft) |

I hereby authorize IFAPAC to withdraw from my account the amount specified below every month. This authorization will remain in effect until revoked by me in writing and, until IFAPAC receives such notice, I agree that IFAPAC shall be fully protected in honoring such withdrawals. In consideration of IFAPAC's compliance with such request and authorization, I agree that IFAPAC's treatment of each such check and IFAPAC's rights with respect to it, shall be the same as if it were signed personally by me and that if any such check be dishonored, IFAPAC shall be under no liability whatsoever even though such dishonor results in the forfeiture of IFAPAC membership.

I am currently enrolled in IFAPAC's Monthly Automatic Payment Program and would like to **change my monthly withdrawal** amount from \$_____ to: (circle one)

\$416.00
 \$210.00
 \$120.00
 \$85.00
 \$45.00
 \$25.00
 \$20.00
 \$17.00
 \$15.00
 \$12.00
Other \$_____

MEMBER ID _____ NAME (PLEASE PRINT) _____

SIGNATURE OF DEPOSITOR (AS SHOWN ON BANK RECORDS) _____ DATE _____

LOCAL ASSOCIATION NAME _____ STATE _____

**RETURN SIGNED FORM TO: IFAPAC; 2901 TELESTAR COURT; FALLS CHURCH, VA 22042-1205
OR FAX TO 703-770-8151**

Contributions to IFAPAC are voluntary and contributed to candidates for elective office. A portion of your contributions will be returned to your state, if you have directed NAIFA to do so. Club levels are merely suggestions. You can contribute more or less than the suggested amount. The amount contributed will not benefit or disadvantage you in any way. You have the right to refuse to contribute without reprisal. Corporate contributions to IFAPAC's political fund are prohibited. Contributions to IFAPAC are not deductible for federal income tax purposes.

(See reverse side to complete the NAIFA Member Directive for IFAPAC Contributions)



NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS – POLITICAL ACTION COMMITTEE

NAIFA Member Directive Regarding the Use of IFAPAC Contributions



On March 14, 2011, an SEC “pay to play” rule designed to limit the influence of political contributions by investment advisers and certain associated persons in the awarding of advisory contracts by state and local governments went into effect. Among other things, the rule prohibits investment advisers from receiving compensation for services provided to a state or local government for two years following political contributions to certain state or local officials.

In response to the rule, a number of companies have adopted compliance requirements that limit contributions by investment adviser representatives to political action committees (PACs) and state or local officials. **You must check with your company’s compliance department regarding any limitations on your ability to make political contributions under the pay-to-play rule. (If you are covered by the rule, your compliance department may limit your contribution to only NAIFA’s federal PAC. If you are not covered, your compliance department should permit your contribution to be shared between NAIFA’s federal PAC and your state association PAC.)**

After you have consulted your compliance department, please check the applicable boxes below to instruct IFAPAC regarding the appropriate distribution of your IFAPAC contribution. *Note: If you do not check a box, your entire contribution will be directed to NAIFA’s federal PAC.*

I have read and understand this directive. *(required)*

CHECK ONE BOX:

Please continue to share my IFAPAC contribution between NAIFA’s federal PAC **and** my NAIFA state association PAC. I agree to reconfirm my compliance status and change this directive, if necessary, should I change or add companies.

OR

Please direct my entire contribution to NAIFA’s federal PAC, to be used **only** for contributions to national party committees and the campaigns of candidates (except state and local officials) for the U.S. Congress.

Contributions to IFAPAC must be personal, not corporate. Contributions made on corporate or LLC accounts will be directed in their entirety to NAIFA’s federal administrative fund to help defray the costs of administering NAIFA’s federal PAC. NAIFA disclaims responsibility for any damage or liability that may arise from contributions to IFAPAC based on the SEC “Pay to Play” Rule or from any company compliance requirements related to that Rule.

NAIFA Member Signature _____

Date _____

NAIFA Member Name (please print) _____

NAIFA Member ID # _____

NAIFA Member Local Association Name _____