TIGER PRIDE POLITICAL ACTION COMMITTEE OF PASCO

WORKSITE	JOB TITLE	PRINT NAME (LAST FIRST)	SOCIAL SECURITY NO.

ADDRESS	CITY	ZIP CODE	HOME PHONE	E-MAIL ADDRESS

TIGER PRIDE POLITICAL ACTION COMMITTEE MEMBERSHIP APPLICATION

☐ **PAYROLL DEDUCTION**
I authorize the District School Board of Pasco County to deduct from my paycheck Political Action Committee (PAC) donations in the amount indicated. I understand that I may terminate this deduction authorization at any time by submitting thirty (30) days written notice to the school Board an USEP.

☐ 1.00 ☐ 2.00 ☐ 3.00 ☐ 4.00 ☐ 5.00 ☐ _____

☐ **CASH DONATION** _____

I certify that this solicitation was not made in any School Board/Government Building.

_____
Signature Date

IRS TAX DISCLOSURE REQUIREMENTS
Dues paid to the Tiger Political action Committee of Pasco contributions may not be deductible for federal income purposes; however, under limited circumstances, dues may qualify as a business expense.

For TIGER PRIDE PASCO Use Only

Date Received:

_____

Date sent to District for processing:

_____
(Effective Date of Membership)

Recruiting Member (please print)