TRUCK	MATION BELOW.	
Date	Company Name	
Name/Title		
Truck PAC Contact Name/Title (i	f different than above)	
Company Address		
Company Address		
Telephone Number	Fax Numbe	r
Email Address		

I authorize TRUCK PAC to communicate with and solicit contributions from me and all eligible executive and administrative personnel in my company. My signature below provides prior approval for solicitation for the stated calendar year.

As required by federal law, my company has not authorized any other trade association PAC to solicit its employees during the calendar years designated and will not approve such solicitations for any year in which prior approval is granted to TRUCK PAC. I understand that TRUCK PAC will contact me to coordinate any solicitation activities with my company's eligible employees. I also understand that this authorization in no way obligates me or anyone else in my company to make a contribution.

Prior approval is granted for (Federal law requires a separate signature for each year):

2017		2018		
	Signature		Signature	
2019		2020		
	Signature		Signature	
2021				
	Signature			
PLEASE RETURN THIS FORM TO THE TRUCK PAC OFFICE IN WASHINGTON, DC BY MAIL OR FAX TO: (202) 318-7421.				
If you have any questions, please contact Truck PAC staff at (202) 544-6245.				

Truck PAC c/o Aristotle International P.O. Box 15441 Washington, DC 20003 Phone: (202) 544-6245 • Fax: (202) 318-7421