

JOINT PUBLIC POLICY TASK FORCE

A Partnership of the Academy of Florida Elder Law Attorneys and the Elder Law Section of the Florida Bar



2017 Pledge Form

All pledges will be on a calendar year and must be fulfilled or be terminated as of December 31 annually, unless you choose to automatically renew each year. Pledges made December 1st or after will be applied starting at the beginning of the following calendar year.

- □ List this pledge under a firm name Please write the names of participating attorneys below. A minimum of \$500 per attorney listed must be committed to include the firm name.
- List this pledge under an individual attorney's name.

Firm/company or Individual Name:_____

If company pledge, please list attoneys:_____

Address:		
City/State/Zip:		
Phone:	Fax:	Email:

CONTRIBUTION LEVELS					
Level 1: Friend	\$500 and above	Amount pledged \$			
Level 2: Sponsor	\$750 and above	Amount pledged \$			
Level 3: Patron	\$1500 and above	Amount pledged \$			
Level 4: Founder	\$2500 and above	Amount pledged \$			
Level 5: Benefactor	\$5000 and above	Amount pledged \$			

Please automatically renew my pledge each year until I notify you otherwise.

Please contact me with pledge status updates via: DE-mail or Phone or Regular mail (Please check your communication preference above. The Task Force encourages economical e-mail communication to make the most of your contribution.)

Make checks payable to "AFELA Legislative Fund"	" or provide your credit card information below.
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I will pay via installments (N	Io checks; Credit Cards only):		Quarterly or \Box	Monthly
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□ I will pay the amount in full (Checks or Credit Cards)

□MasterCard □ Visa □American Express

Name on Card:		Card #:			
Expiration:	Billing Zip:	Signature:			

CVV Code: _____ CVV codes are 3 digit codes on back of V/MC and 4 digit codes on front of AmEx

Please return your completed Pledge Form via email to jennifer@afela.org or mail to: Academy of Florida Elder Law Attorneys, 3380 Barrow Hill Trail, Tallahassee, FL 32312