



Independent Insurance Agents & Brokers of America, Inc.

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Name: _____ Title/Occupation: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Suggested Contribution: \$

☐ I am a Young Agent

One-Time Payment (Check or Credit Card)

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$5,000 Millennium Club | <input type="checkbox"/> \$1,000 Centennial Club | <input type="checkbox"/> \$250 Pioneer Club | <input type="checkbox"/> \$100 Young Agent |
| <input type="checkbox"/> \$2,500 Platinum Club | <input type="checkbox"/> \$500 Gold Club | <input type="checkbox"/> \$150 Founders Club | <input type="checkbox"/> \$_____ (Other) |

OR

Monthly Payments (credit card withdrawal on the 15th of each month)

Start Month: _____ ☐ \$250 Month ☐ \$50 Month ☐ \$10 Month
End Month: _____/_____/_____ ☐ \$100 Month ☐ \$25 Month ☐ \$_____ Month

Personal Check (payable to "InsurPac")

Credit Card: ☐ American Express ☐ VISA ☐ Mastercard

Card Number: _____ Exp. Date: _____/_____/_____

****All forms of payment must be by personal check, credit card or non-incorporated agency check.

Authorized Signature: _____ Date: _____/_____/_____

Contributions or gifts to InsurPac are not deductible as charitable contributions for purposes of federal income tax. Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and employer for each individual whose contributions aggregate in excess of \$200 in a calendar year. Your contribution should be considered strictly voluntary.