

## PRIOR APPROVAL FORM

Name	Title			
Company Name				
Address				
City	Sta	ate	Zip Code	
solicited by the NAED Political A committee that supports candid	Action Committee (NAEDPAC). The Company dates for federal office for the selected calend	may not approve a so dar years. On behalf o	xecutive or administrative personnel of the Company to b blicitation by any other trade association's political action f my Company, I am authorized and do hereby authorize tockholders of my Company for the following years:	
2025		2028		
	Authorized Signature		Authorized Signature	
2026		2029		
,	Authorized Signature		Authorized Signature	
2027		2030		
•	Authorized Signature		Authorized Signature	
First Name	Last Name			
Job Title	Job Function	on		
Email Address			Phone	
COMPANY INFORMATION	ON			
Company Name				
Company Function				
Company Address				
City	Sta	ate	Zip Code	
PERSONAL CONTRIBU	TION AMOUNT			
Dollar Amount	Best Number t	Best Number to Reach You*		
Signature			Date	

\* Please enter a phone number for NAEDPAC staff to call you to collect your personal credit card information.