



OHIO PROPANE PAC

YES, I would like to donate to the Ohio Propane PAC. Enclosed is my personal check in the amount of: _____

\$50 **\$100** **\$200** **other** _____

Please charge my credit card: \$ _____

Visa MasterCard American Express

CC #: _____ Exp: _____

Cardholder Name: _____

Signature: _____

All checks should be made payable to:

OHIO PROPANE PAC

Send to OPGA PAC • 605 N. High Street, #214 • Columbus, OH 43215

NO CORPORATE CHECKS PLEASE. Your personal, sole proprietorship or partnership checks are welcome. (Please indicate how the contribution should be allocated among the partners.)

Name: _____

Home Address: _____

Home City, State, Zip: _____

Employer Name: _____

Occupation: _____

Email Address: _____