

# TACC-PAC MEMBERSHIP FORM

*I will do my part to assure my industry of continued political strength.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Amount of Contribution: \$ \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I am personal friends with  
*(name of Senator, House Member, State Agency Executive, etc.):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am a director of the following cooperatives:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Send all monies (cash and personal checks only) and contributor names  
and addresses to:*

**Texas Agricultural Cooperative Council**  
**Political Action Committee (TACC-PAC)**  
1210 San Antonio Street, Suite 101  
Austin, Texas 78701  
512/450-0555