



AFTNJ Political Committee Contribution Form

\$10 \$25 \$50 \$100 Other _____

Name: _____

Address: _____

Occupation: _____

Employer: _____

Employer Address: _____

Amount of Contribution: _____ (NOTE: please make checks payable to our legal name "AFTNJSF COPE") _____

Date of Contribution: _____

The above information is required for NJ ELEC's reporting guidelines. Your information is confidential and will only be shared with NJ ELEC upon request.

Please print, complete and return with check to:

AFTNJ COPE
629 Amboy Ave. Third floor.
Edison, NJ 08837