



SCI-PAC CANDIDATE CONTRIBUTION REQUEST FORM

CANDIDATE CONTRIBUTION INFORMATION

Name of Member of Congress:

State:

Congressional District (for U.S. Senate put N/A):

Do you have a personal relationship with this Member of Congress (*not a requirement*):

Yes No

Date/event where you plan to give the contribution* and amount requested:

Will you require SCI staff help to identify an event to make the contribution:

Yes No

SCI MEMBER INFORMATION

SCI Member Requesting:

Zip Code:

SCI Member Email to Confirm Recipient of Contribution Form:

Are you a U.S. citizen: Yes No

Please Send the Completed Form and/or Any Questions To:

*Safari Club International
Attn: SCI-PAC
501 2nd Street
Washington, DC 20002
Phone: 202-543-8733*

SCI Staff must have completed form **three (3) weeks prior to event date.*