



MoANA PAC

I am a professional CRNA...

by credit card:

- I am proud to be a nurse anesthetist. I understand the need for advocacy. I can afford \$2 a day for such a worthwhile cause. Deduct \$60.00 per month from my credit card.
- I want to be a protector of my profession. Sign me up for \$1 a day. Deduct \$30.00 per month from my credit card.
- With important issues in the upcoming election, please deduct a one-time contribution of \$_____ from my credit card.

by check (make checks to MoANA PAC):

- I love my profession! I am giving \$2 a day! I am enclosing a check for \$720.00.
- My profession has been very good to me. The least I can do is give \$1 a day. I am enclosing a check for \$360.00.
- I will not stand by and watch our profession be attacked, I will help. Enclosed is my check for \$_____.

Name _____ Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

For credit card use:

Mastercard Visa Discover

Name as it appears on card (if different from above): _____

Credit card No: _____ Expiration: _____

Signature _____ I authorize MoANA PAC to debit my credit card for the amount and frequency shown. I understand I may cancel at any time.

Mail to: MoANA PAC
205 E. Capitol Ave., Ste. 100
Jefferson City, MO 65101
Phone: 573-634-8760
Private Fax: 573-636-6899