

***Russell A. Smith, CLU, ChFC, CFP®***



*for*  
**NAIFA**  
**Secretary**  
*Campaign Fund  
Contribution Form*

- \$ 50                       Check Payable to the “**Campaign Fund**” Enclosed
- \$ 75
- \$100                      Credit Card # \_\_\_\_\_
- \$200                       MasterCard    VISA   Expiration Date \_\_\_\_\_
- \$250
- \$500                      Signature \_\_\_\_\_
- Other \_\_\_\_\_

Name \_\_\_\_\_

NAIFA Member ID \_\_\_\_\_ Local Association \_\_\_\_\_

Company \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

**Please return this form via fax to (916) 646-8130  
Or mail it to:  
NAIFA-California Campaign Fund,  
1451 River Park Drive Suite 175, Sacramento, CA 95815-4520**

***Thank You!***

[www.naifacalifornia.org](http://www.naifacalifornia.org)

[office@naifacalifornia.org](mailto:office@naifacalifornia.org)