



Independent Insurance Agents of Oklahoma

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P.O. Box 13490 | Oklahoma City, OK 73113
P: (405) 840-4426 | F: (405) 840-4450 | info@iiaok.com

INSURE YOUR FUTURE!

By making a contribution to OkPac, you are investing in the future of independent insurance agents across Oklahoma. Please note: All contributions must be made by PERSONAL check or PERSONAL credit card. Company or Agency accounts cannot be used.

CONTRIBUTOR INFORMATION

Name: _____
Agency: _____ Occupation: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Count me in! I want to INSURE MY FUTURE with a personal contribution to OkPac at the following level/amount: (select one)

- | | |
|---|--|
| <input type="checkbox"/> \$5,000 - Millenium Level | <input type="checkbox"/> \$250 - Pioneer Level |
| <input type="checkbox"/> \$2,500 - Platinum Level | <input type="checkbox"/> \$150 - Founders Level |
| <input type="checkbox"/> \$1,000 - Centennial Level | <input type="checkbox"/> \$100 - Young Agent Level |
| <input type="checkbox"/> \$500 - Gold Level | <input type="checkbox"/> Other: \$ _____ |

- I am including a PERSONAL check made payable ot OkPac.
- I will submit payment online via <https://okpac.epaypolicy.com>

National Support: I want to INSURE MY FUTURE on a national level with a personal contribution to InsurPac in the amount of: \$ _____

- I am including a separate personal check made out to InsurPac.
- Please process my credit card. *(Note: Card information may not be provided for OkPac.)*
 Credit Card Number: _____ Expiration Date: _____
 Name on Card: _____ CVV: _____

Contributions or gifts to InsurPac and OkPac are not deductible as charitable contributions for purposes of federal income tax. Federal and State law require IIABA and IIAOK to use our best efforts to collect and report the name, mailing address, occupation and name of employer for each individual. Your contribution should be considered strictly voluntary. Any corporate contributions are prohibited.

Declaration: *The contribution listed above was freely and voluntarily given by me from my personal property. I have not, directly or indirectly, been compensated or reimbursed for the contribution listed above.*

Signature: _____ Date: _____