

VACUPAC INDIVIDUAL CONTRIBUTION FORM

Name of Credit Union: _____

Date: _____ CU Phone: _____

Address of Credit Union: _____

City/State/Zip: _____

Note: Need additional space? Feel free to copy this form or attach an additional list.

CHAIRMAN (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

1ST VICE CHAIRMAN (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

2ND VICE CHAIRMAN (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

3RD VICE CHAIRMAN (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

SECRETARY (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

TREASURER (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

DIRECTOR (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

DIRECTOR (NAME) _____ Contribution Amount _____

Home Address _____ City _____ Zip _____

CHECKLIST

Use this form to report VACUPAC contributions by individuals at your credit union to your League.

Please return this completed form to:
Virginia Credit Union League
Governmental Affairs
P.O. Box 11469
Lynchburg, VA 24506-1469

Share drafts/Checks should be made payable to **VACUPAC**

QUESTIONS?

Contact your League's David Miles at 800.768.3344, ext. 608 or dmiles@vacul.org

VACUPAC INDIVIDUAL CONTRIBUTION FORM

DIRECTOR (NAME)

Contribution Amount

Home Address

City

Zip

DIRECTOR (NAME)

Contribution Amount

Home Address

City

Zip

PRESIDENT/CEO/MANAGER (NAME)

Contribution Amount

Home Address

City

Zip

SENIOR STAFF (NAME & TITLE)

Contribution Amount

Home Address

City

Zip

SENIOR STAFF (NAME & TITLE)

Contribution Amount

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REPORT THESE ADDITIONAL DETAILS

Grand Total of Contributions Attached with This Report: \$ _____

Date of Contribution (date you submitted/mailed this contribution): _____

If applicable, please mark the following. These contributions represent:

- 100% participation of our credit union's Board of Directors.
- 100% participation of our credit union's Credit Committee.
- 100% participation of our credit union's Supervisory Committee.
- 100% participation of our credit union's staff.

NEED VACUPAC PINS?

Yes, we need VACUPAC pins! Remember, any contribution from an individual totaling more than \$25 qualifies that individual for one of the VACUPAC pin clubs (see info below).

Please send the appropriate number to

Contact Name: _____

Address: _____

(if different from the address you previously reported):

SUGGESTED GIVING LEVELS

CU Asset Size	CEO	Senior Staff	Volunteers /Staff
\$1 Billion or more	\$1,500	\$500	\$25
\$500 Million - \$999 Million	\$1,000	\$500	\$25
\$100 Million - \$499 Million	\$500	\$250	\$25
\$50 Million - \$99 Million	\$250	\$100	\$25
Less than \$50 Million	\$100	\$25	\$25

We're often asked for guidance on an appropriate PAC contribution for volunteers/staff at credit unions of various asset sizes. This guide was endorsed by credit union professionals/volunteer officials serving on the League's StateWide Advocacy Council (SWAC).

JOIN THE CLUB!

Personal contributions to VACUPAC of more than \$25 in a calendar year earn the contributor a spot in one of our VACUPAC pin clubs based on the following minimum giving levels.

- Commonwealth Club - \$1,500
- President's Club - \$1,000
- Chairman's Club - \$500
- Capitol Club - \$250
- Cardinal Club - \$100
- 52 Club - \$52
- Executive Club - \$25



Members of the various VACUPAC pin clubs are recognized on the League website and in our Annual Report!
www.vacul.org

