



HIPAC Contribution Form



Thank you for contributing to the CRA HIPAC. The information below is gathered to provide to the Secretary of State which is required by law. Contributions to HIPAC are not tax deductible as business expenses or charitable contributions.

Name: _____

Restaurant/Company: _____

Event Attending: _____

Please choose one below – Corporate Contribution or Personal Contribution:

PERSONAL CONTRIBUTION

**Article XXVIII, Section 7 – Disclosure. Contributions of \$100 or more from natural persons must include contributor's occupation & employer. (A one-time contribution, not aggregate.)*

Home Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Employer: _____

Title: _____

CORPORATE CONTRBUTION

Company Name: _____

Check if Company is a LLC –
LLC's contributing to HOSTPAC must provide a written affirmation statement at the time of contribution.

Company Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

PAYMENT INFORMATION

Cash \$ _____ Check \$ _____ Credit \$ _____

Name on Card: _____

Card Number: _____ Expiration Date: _____

Signature: _____

Return To:
Colorado Restaurant Association | 430 E 7th Ave | Denver, CO 80203
snakon@corestaurant.org
Phone: 303-830-2972 or Fax: 303-830-2973