

**Joint Public Policy Task Force**  
*A Partnership of the Academy of Florida Elder Law Attorneys  
and the Elder Law Section of the Florida Bar*

## Pledge Commitment Form

All pledges will be on a calendar year and must be fulfilled or be terminated as of December 31 annually, unless you choose to automatically renew each year. Pledges made December 1st or after will be applied starting at the beginning of the following calendar year. Up to 20% of your contribution may be used for necessary administrative purposes.

- List this pledge under a firm name (please write the names of participating attorneys below)  
 List this pledge under an individual attorney's name.

Firm/company or Individual Name \_\_\_\_\_

If company pledge, please list attorneys \_\_\_\_\_

Address \_\_\_\_\_

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

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

### Contribution Levels

- |  |                  |                         |
|--|------------------|-------------------------|
| <input type="checkbox"/> Level 1 Friend      | \$500 and above  | Amount pledged \$ _____ |
| <input type="checkbox"/> Level 2: Sponsor    | \$750 and above  | Amount pledged \$ _____ |
| <input type="checkbox"/> Level 3: Patron     | \$1500 and above | Amount pledged \$ _____ |
| <input type="checkbox"/> Level 4: Founder    | \$2500 and above | Amount pledged \$ _____ |
| <input type="checkbox"/> Level 5: Benefactor | \$5000 and above | Amount pledged \$ _____ |

Please automatically renew my pledge each year until I notify you otherwise.

Please contact me with pledge status updates via:  E-mail or  Phone or  Regular mail  
*(Please check your communication preference above. The Task Force encourages economical e-mail communication to make the most of your contribution.)*

I will pay via installments (No checks; Credit Cards only)  Quarterly or  Monthly

I will pay the amount in full (Checks or Credit Cards)

MasterCard

Visa

American Express

Name on Card: \_\_\_\_\_ Card #: \_\_\_\_\_

Expiration: \_\_\_\_\_ Billing Zip: \_\_\_\_\_ Signature: \_\_\_\_\_

CVV Code: \_\_\_\_\_ (CVV codes are 3 digit codes on back of V/MC and 4 digit codes on front of AmEx)

**Make checks payable to "AFELA Legislative Fund" or provide your credit card information.**

We are happy to answer any questions you may have. Please contact John S. Clardy, III, Esq. at (352) 795-2946 or [Clardy@tampabay.rr.com](mailto:Clardy@tampabay.rr.com). Return your completed Pledge Commitment Form via fax to (352) 795-2821, or mail to Public Policy Task Force, c/o Clardy Law Firm, PA, PO Box 2410, Crystal River, FL 34423