

Membership Application

Support BluesPAC and make your voice heard!

The mission of BluesPAC is to provide its members with a collective opportunity to be involved in the political process for the good of the organization and the communities it serves by supporting candidates whose political views are closely aligned with those of Blue Cross Blue Shield of Michigan and its subsidiaries.

Employment Level	President's Schedule	*Suggested Circle Contribution Schedule
Per Pay Period		
Other Exempt	\$10.00.....	\$6.00
Managers.....	\$20.00.....	\$13.00
Directors.....	\$32.00	
Vice Presidents.....	\$60.00	
Senior Vice Presidents & Above.....	\$100.00	

* The suggested amount is only a suggestion. The amount voluntarily given by the employee will not benefit or be a disadvantage to the employee being solicited.

Note: BluesPAC benefits political candidates and activities on the federal, state and local levels whose political views are closely aligned with those of BCBSM and its subsidiaries. Suggested contribution amounts are only suggestions, and actual contributions may be more or less than the suggested amounts. BCBSM and its subsidiaries will not favor or disfavor employees according to pledged donations or non-participation, and it is your right to refuse to contribute without any reprisal. BluesPAC is required by law to report all contributions to the Federal Elections Commission and the State Elections Bureau. These contributions are not charitable deductions for federal income tax purposes. Please consult with a tax advisor to determine if all or a portion of your contribution may be tax deductible for Michigan income tax purposes.

(Return to MC L10A – BluesPAC Administration or bluespacadministration@bcbsm.com)

YES, I want to become a BluesPAC member.

- * I certify that I am a U.S. citizen or a permanent U.S. resident.
- * I understand that my contribution will be shared by both BluesPAC and BluePAC, the PAC of the Blue Cross and Blue Shield Association.
- * I understand that my contribution will be included in contribution limitations and that my individual contribution limit to a PAC for a calendar year is \$5,000 pursuant to federal law.
- * I understand that contributions made in the name of another are prohibited.
- * I understand that if I enroll in BluesPAC as an employee of BCBSM or a subsidiary, and I subsequently transfer to a different entity within the BCBSM enterprise, my enrollment and contributions will continue.

_____ Bi-weekly Payroll Deduction: I hereby authorize BluesPAC to deduct \$_____ from each pay period until I terminate such deduction.

_____ One-time Payroll Deduction: I hereby authorize BluesPAC to deduct \$ _____ from my paycheck once each calendar year. Funds will be deducted on an annual basis from the first pay period of the calendar year or the pay period following receipt of application until I terminate such deduction.

_____ Personal Check Contribution: Included with this application I have enclosed my personal check made payable to BluesPAC in the amount of \$ _____. *(Note: Due to Federal Campaign Finance Laws, please do not submit your personal check for membership until after January 1 of each year.)*

Name _____

Employee ID _____

Position/Title _____

Organization

- _____ Blue Cross Blue Shield of Michigan
- _____ Accident Fund Insurance Company of America
- _____ LifeSecure
- _____ COBX Co.
- _____ ikaSystems Corporation
- _____ Tessellate, LLC
- _____ Other _____

Home Address _____

City/State _____

Zip Code _____ County _____

Work Phone _____

Work E-mail Address _____

Date _____

Signature _____

- * Section 55(6) of the Michigan Campaign Finance Act provides that a connected organization may solicit or obtain contributions for a separate segregated fund established under this section from an eligible employee on an automatic basis, including but not limited to a payroll deduction plan, only if the individual who is contributing to the fund affirmatively consents to the contribution.