



Independent Insurance Agents & Brokers of America, Inc.
 412 First Street, SE #300 / Washington, DC 20003
 Phone: (202) 863-7000 Fax: (202) 863-7015 InsurPac@iiaba.net

**CORPORATE AGENCY PRIOR APPROVAL AUTHORIZATION FORM
 & AGENCY DESIGNATION FORM**

The purpose of this form is to provide InsurPac with Agency designation information and the authorizations required by the Federal Election Campaign Act in order to solicit personal and voluntary contributions from executives and administrative personnel. Once approval is given, the corporate agency may not authorize solicitations by any other trade association of corporate members for the same calendar year.

Revisions in the Federal Election Campaign Act permit trade associations to obtain solicitation authorization from their corporate members for more than one calendar year. This form can only be signed by a corporate employee authorized to provide solicitation approval.

I hereby authorize InsurPac to solicit executives and administrative personnel for personal and voluntary contributions **during the calendar years indicated by my signature.**

NAME (please print)	(SIGNATURE)	2014
TITLE (please print)	(SIGNATURE)	2015
COMPANY (please print)	(SIGNATURE)	2016
ADDRESS (please print)	(SIGNATURE)	2017
CITY, STATE ZIP (please print)	(SIGNATURE)	2018
E-MAIL ADDRESS (please print)	/ /	DATE

Important-Please check the corresponding agency designation.

INC. Partnership Sole Prop. LLC LLP Other _____