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ANJC PAC Needs You More Than Ever!

Every NJ Chiropractor Needs ANJC PAC Now, More Than Ever!

Dear Colleagues:

Simply stated, the time is now to donate to ANJC PAC in order to help support legislators who are chiropractic patient-friendly and who will work to stop abuses against our patients and profession.

ANJC PAC utilizes funds on a continuous basis to meet legislators at their legislative fund-raising functions in order to create opportunities to discuss, explain and persuade them that a particular chiropractic issue is important and should be supported. We also work to educate legislators when there are issues that may be harmful to our patients or potential patients.

You know it; we know it – The recent adverse extraspinal CMT determination is a travesty.

We need to meet with and educate legislators as to the importance of supporting *A 3122/S2636 Chiropractic Scope of Practice Act*, which, if passed into law, will correct the extraspinal CMT problem recently encountered.

We need to raise ANJC PAC funds NOW! We have set a goal for every chiropractor in the state to donate \$25/mo or \$300/yr. in order to have the necessary funds to attend legislative receptions, functions, Chamber of Commerce Legislative train rides and other functions so we can *spread the chiropractic word*. That way we can help your patients and you, who are continually getting hammered from every direction. You simply can't afford NOT to help out by contributing.

PAC Contribution

Name _____			
Address _____		City _____	State _____ Zip _____
Phone _____	Fax _____	Email _____	
Amount Contributing: <input type="checkbox"/> \$25/mo <input type="checkbox"/> \$25/qtr <input type="checkbox"/> Other _____		<input type="checkbox"/> Credit Card or <input type="checkbox"/> Debit Card	<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> AMX <input type="checkbox"/> Discover
Card # _____		Exp Date _____	
<input type="checkbox"/> Check	Please make payable to ANJC PAC (mail to address listed in letterhead)		
The undersigned authorizes <i>ANJC</i> to charge the credit card/debit card in the amount indicated. Monies are earmarked for ANJC PAC. Please check with your tax advisor to determine if this donation is tax deductible.			
Signature _____		Please fax to 908.722.5677 Mail checks to ANJC headquarters For more info call 908.722.5678	
Date _____			

Thanks in advance for considering,

Sigmund Miller, DC, FICC
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