



Consent to Release Contact Information

Name: _____

Organization: _____

Address: _____

City/State/Zip: _____

Telephone Number: _____

Fax Number: _____

E-mail Address: _____

By signing below, you are authorizing us to include the contact information requested above in the notebooks provided to conference participants at registration. Your consent is purely voluntary and refusing to sign does not in any way limit your right to participate in the conference. If you would like to share your contact information with other conference attendees, please sign and date the statement immediately below.

I understand that by signing this statement, I am consenting to the dissemination of my contact information, as described above, by the Federal Election Commission to the other attendees at this conference.

Signature: _____

Date: _____

This completed form must be emailed (conferences@fec.gov) or faxed (202-219-8504) to the FEC's Information Division by August 3, 2015, to have your contact information included.