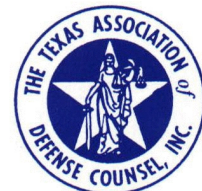


Texas Association of Defense Counsel PAC



The Political Action Committee of the Texas Association of Defense Counsel

TADC-PAC

THE TADC WILL WORK TIRELESSLY DURING THIS LEGISLATIVE SESSION **PROTECTING THE CIVIL JUSTICE SYSTEM!**

Show Your Support for the TADC PAC

Your contribution allows the TADC PAC to support *Qualified* candidates for the Texas Supreme Court, Texas Legislature & other key positions

CAN YOU AFFORD **NOT** TO CONTRIBUTE?

- OVER **95%** OF CANDIDATES & INCUMBENTS SUPPORTED BY THE TADC PAC ARE ELECTED TO OFFICE
- THE TADC PAC SUPPORTS CANDIDATES BASED ON RECORD & QUALIFICATIONS **NOT** POLITICAL AFFILIATION
- THE TADC PAC SUPPORTS CANDIDATES WHO **FAVOR** A STRONG AND INDEPENDENT JUDICIARY, **OPPOSE** INFRINGEMENT ON THE RIGHT TO JURY TRIALS AND **AGREE** WITH THE NEED TO PRESERVE THE CIVIL JUSTICE SYSTEM.
- THE TADC PAC **OPPOSES** STATUTORY EMPLOYER AND COLLABORATIVE LAW LEGISLATION
- THE TADC PAC **SUPPORTS** EFFORTS TO END THE CAPRICIOUS ENFORCEMENT OF ARBITRATION CLAUSES AND TO LIMIT THEIR APPLICABILITY TO MATTERS WHERE THE PARTIES TO THE AGREEMENT HAVE EQUAL BARGAINING POWER
- YOUR PAC TRUSTEES REPRESENT **YOUR** INTERESTS TO CANDIDATES AND OFFICE HOLDERS
- OTHER ASSOCIATIONS **ARE** GIVING, IF YOU DON'T, THAT **WILL** PUT YOU AT A DISTINCT DISADVANTAGE

As a thank-you for your support, contributions of \$200 or more will receive a high quality windbreaker/jacket embroidered with the TADC Logo. Jackets are Black with Grey and Black embroidered Logo.

Jackets are available for a limited time only.

I BACK THE TADC PAC

Enclosed is my TADC PAC Contribution in the amount of:

\$150.00 _____ \$200.00 _____ \$250.00 _____ Other \$ _____

_____ Yes, My contribution is for \$200.00 or more, please send me my Jacket with the TADC Logo

SIZE (mens & womens sizes): S M L XL XXL
please check your size carefully, as there are no refunds or exchanges

Payment Enclosed:

\$ _____
amount enclosed

Make checks payable to the TADC PAC, return order form and payment to the TADC, 400 West 15th Street, Suite 315, Austin, Texas 78701 FAX: 512/476-5384

I am paying by: (circle one)
Check Amex Visa MC

Name _____

Firm _____

Address _____

City/State/Zip _____

Cardnumber _____ Exp. Date _____

Signature as it appears on card _____