



**Tax and Budget Policy Subcommittee
& Task Forces**

Participant Selection Sheet

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail: _____

Please place me on the following committee and task forces: *If you are already a member of any of these groups and wish to remain a member, please check the appropriate box.*

<input type="checkbox"/>	Tax and Budget Policy Subcommittee	<input type="checkbox"/>	R&D Tax Credit Task Force
<input type="checkbox"/>	Tax Forum	<input type="checkbox"/>	Retirement Security Task Force
<input type="checkbox"/>	Alternative Minimum Tax (AMT) Task Force	<input type="checkbox"/>	Small Business Tax Policy Task Force
<input type="checkbox"/>	Capital Cost Recovery Task Force	<input type="checkbox"/>	Task Force on Taxes & E-commerce Clause
<input type="checkbox"/>	Energy & Environmental Tax Task Force	<input type="checkbox"/>	Tax Reform Task Force
<input type="checkbox"/>	International Tax Task Force	<input type="checkbox"/>	Newsletter: <i>Tax Talk</i>

Please return by email or fax the completed selection sheet form to:

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 Tax and Domestic Economic Policy
 National Association of Manufacturers
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