



National Energy & Fuels Institute

ADVOCACY FUND CHALLENGE 2026

At NEFI, we're dedicated to driving market innovation, protecting consumer choice, and standing behind America's family-owned home comfort businesses. With your support, we can keep doing just that.

We need your help to get there. Your generous contribution to NEFI's 2026 Advocacy Fund goes directly towards protecting your interests in Washington DC.

Star Group/Petro will match 25% of the first \$200,000 in contributions to strengthen NEFI's initial advocacy efforts.

RETURN THIS FORM BY ...

US MAIL:
P.O. Box 822
Wilmington, MA 01887

FAX:
(508) 373-2740

EMAIL:
Scan and e-mail to nefi@nefi.com

You may also donate online at:
NEFI.COM/DONATE

NOTE: Contributions to the NEFI Advocacy Fund are not used to support politicians. It directly supports our industry's advocacy and related communication efforts. Business contributions are accepted and 35% is tax deductible as a trade or business expense under IRS Sec. 162(a). The remaining 35% of your contribution will be used for lobbying and related expenses and is therefore not tax deductible.

CONTRIBUTOR TYPE

SUGGESTED \$

- Friend of NEFI** \$250
- HVAC Service Only Business** \$500
- Vendor/Service Provider** \$750
- Fuel Distributor** *(based on annual fuel gallonage sold - check below)*
 - Up to 500,000 \$1,000
 - 500,000 to 1,000,000 \$2,000
 - 1,000,000 or more \$3,500
 - 2,000,000 or more \$5,000
 - 3,000,000 or more \$7,500
 - 5,000,000 or more \$9,000
 - 7,000,000 or more \$13,000
 - 10,000,000 or more \$19,000
 - 15,000,000 or more \$26,000
 - 25,000,000 or more \$35,000
- Other** \$ _____

PAYMENT INFORMATION

PAYMENT OPTIONS:

- Single Payment *(preferred method)*
- Quarterly Payment Plan
- I want my contribution published as anonymous

PAYMENT TYPE:

- Business Check
- Pledge (bill my company)
- Credit Card
 - Visa Card # _____
 - Mastercard
 - Discover Expiration Date: _____
 - AMEX

CONTACT INFORMATION

COMPANY NAME: _____
(As it should appear in NEFI publications)

CONTACT NAME & TITLE: _____

STREET ADDRESS: _____

CITY STATE & ZIP: _____

OFFICE PHONE: _____ EMAIL ADDRESS: _____