

# NFIB

## CANDIDATE QUESTIONNAIRE 2014

Candidate Name: \_\_\_\_\_

Candidate Committee: \_\_\_\_\_

State/District: \_\_\_\_\_

Party Affiliation: \_\_\_\_\_

Campaign Address: \_\_\_\_\_

\_\_\_\_\_

Campaign Phone: \_\_\_\_\_

Campaign Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website URL: \_\_\_\_\_

Twitter Handle: \_\_\_\_\_

Facebook Page: \_\_\_\_\_

**PLEASE SEND COMPLETED TO:**

**Attn: Sharon Wolff Sussin  
National Political Director**

**Fax – (615) 916-5132  
Email – political@nfib.org**

**NFIB Political  
1201 F Street, NW  
Suite 200  
Washington, DC 20004  
(202) 554-9000**

**This document is necessary for consideration of support by NFIB SAFE Trust and may be used for future voter education purposes.**

**Campaign Information**

Staff Contact & Title: \_\_\_\_\_

Campaign Manager: \_\_\_\_\_

Press Secretary: \_\_\_\_\_

Finance Chairman: \_\_\_\_\_

Pollster: \_\_\_\_\_

Media Consultant: \_\_\_\_\_

Political Strategist: \_\_\_\_\_

PAC Fundraiser: \_\_\_\_\_

Fundraiser: \_\_\_\_\_

Have you taken a public opinion poll in your race?  Yes  No

If yes, when? \_\_\_\_\_

If no, when do you plan to conduct one? \_\_\_\_\_

Does NFIB have your permission to call and discuss your survey with your pollster?

(Please initial) Yes \_\_\_\_\_ No \_\_\_\_\_

**Candidate Information**

Current employment: \_\_\_\_\_

Are you a current or former small business owner?  Yes  No

Name of business (if applicable): \_\_\_\_\_

Business address: \_\_\_\_\_

Are you a current NFIB member?  Yes  No

If yes, when did you join? \_\_\_\_\_

If no, were you a member in the past? \_\_\_\_\_

Other business associations you are a member of: \_\_\_\_\_

Have you ever been elected or appointed to public office?  Yes  No

If yes, years of service and office(s): \_\_\_\_\_

If no, have you ever run for an elected office?  Yes  No

Election year and office(s): \_\_\_\_\_

If you are elected to Congress, list your top three priorities for your first term and why:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

What is the most important issue for small-business owners in your state/district?

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If elected, on which committees would you most like to serve?

1. \_\_\_\_\_
2. \_\_\_\_\_

List two reasons small-business owners should support your campaign:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

List names and/or companies (if known) of NFIB members supporting your campaign:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List any other endorsements you've received:

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**Fiscal/Tax Policy: Do you FAVOR or OPPOSE (please mark one)...**

- |  |                                |                                 |
|--|--------------------------------|---------------------------------|
| 1. Full repeal of the estate tax?  | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 2. Make the small business (section 179) expensing limit permanent?        | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 3. Raising individual income tax rates?                                    | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 4. Passage of a balanced budget amendment to the Constitution?             | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 5. Simplifying the tax code and reducing the tax burden on small business? | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 6. Allowing federal bailouts for state budget shortfalls?                  | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |

**Healthcare: Do you FAVOR or OPPOSE (please mark one)...**

- |   |                                |                                 |
|---|--------------------------------|---------------------------------|
| 1. Repealing the Patient Protection and Affordable Care Act (PPACA)?  | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 2. Repealing the employer mandate in PPACA?   | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 3. Repealing the health insurance tax in PPACA?   | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 4. Allowing small-business owners to pool together across state lines to purchase healthcare coverage?                            | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 5. Providing equal tax treatment for self-employed individuals who choose to deduct health insurance premiums from payroll taxes? | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 6. Requiring employers to provide health care coverage to their employees?  | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |

**Regulatory Reform: Do you FAVOR or OPPOSE (please mark one)...**

- |   |                                |                                 |
|---|--------------------------------|---------------------------------|
| 1. Allowing a first-time suspension of fines against small-business owners who violate minor paperwork requirements?                    | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 2. Reinstating OSHA's regulation concerning ergonomics in the workplace? (repetitive motion injuries)                                   | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 3. Requiring federal agencies to include estimates of indirect costs (ex. increased energy prices) for proposed regulations?            | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 4. Awarding attorney's fees to small-business owners when they prevail in a lawsuit against the government?                             | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 5. Expanding the Small Business Regulatory Enforcement Fairness Act (SBREFA) to cover all agencies whose rules affect small businesses? | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |

**Labor Issues: Do you FAVOR or OPPOSE (please mark one)...**

- |  |                                |                                 |
|--|--------------------------------|---------------------------------|
| 1. Lowering or eliminating the small business exemption (50 employees) to the Family and Medical Leave Act?  | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 2. Requiring small business owners to pay for employee sick leave?   | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 3. Requiring unions to notify its membership of their right to refuse to pay for union political activities? | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 4. Allowing union organizers access to a private place of business?  | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |
| 5. Expanding Davis-Bacon prevailing wage requirements?   | <input type="checkbox"/> FAVOR | <input type="checkbox"/> OPPOSE |

*Continued...*

6. Prohibiting the use of Project Labor Agreements on taxpayer funded projects?  FAVOR  OPPOSE

7. Raising the federal minimum wage?  FAVOR  OPPOSE

**Please feel free to attach additional pages and comments on your interest and support of small business.**

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\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

I understand that NFIB and NFIB SAFE Trust consider the responses to this questionnaire to be formal policy positions and maintains the right to disclose responses for education purposes.