



Reject The Debt

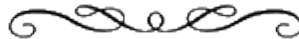
I, _____, pledge to the citizens of my state and to the American people that, except when related to a congressional authorization of force, I will:

***ONE**, consider all spending open for reduction and vote only for budgets that present a path to balance; and*

***TWO**, vote against any appropriations bill that increases total spending and against the authorization or funding of new programs without offsetting cuts in other programs.*

SIGNED: _____ **DATE:** _____

State: _____ **District:** _____
(if applicable)



WITNESS: _____ **DATE:** _____

print

WITNESS: _____ **DATE:** _____

print

Please sign and date the pledge, along with two witnesses, and return it to:

Coalition to Reduce Spending
P.O. Box 1031
Alexandria, VA 22313

