



Police Defunder Pledge

I, _____, pledge to the taxpayers of the state of _____,

that having voted for or supported the reduction of police services to you I will voluntarily refuse any taxpayer funded police or other protection including calling the police for help under any circumstances so as not to selfishly use any of the remaining limited public safety resources.

Signature

Date

Witness

Witness

Please mail signed pledges to: National Police Association 8710 Bash Street #501692 Indianapolis, IN 46250

NationalPolice.org