

Thank you for your contribution. Our campaign is possible because of supportive individuals like yourself. Please visit our website to get involved and remember, Vote For What You Believe In!

The Tasini Team

Please fill out the bottom portion and send in with your check.

\_\_\_\_\_

Name	Address	
City	State	Country
Phone	Email	

## Employment Information - Campaign finance law requires us to collect and report your occupation and employer.

Occupation \_\_\_\_\_Employer \_\_\_\_\_Employer \_\_\_\_\_Employed, enter "self".

## **Contribution Eligibility**

I confirm that the following statements are true and accurate.

- 1. I am a United States citizen or a permanent resident alien
- 2. This contribution is made from my own funds, and funds are not being provided to me by another person or entity for the purpose of making this contribution.
- 3. I am making this contribution with my own personal credit card or check and not with a corporate or business credit card or check or a credit card or check that is issues to another person.
- 4. I am not a federal contractor
- 5. I am at least eighteen years old

Sign here: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

MAIL TO: Tasini For New York, P.O. Box 302, New York, NY 10040