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| **Campaign Contributions** |
| **Name:**

|  |  |
| --- | --- |
| **Home Address:**   | **Phone#s:**  |
|  |  |

**Amount: [] $25 [] $50 [] $100 [] $250 [] $500 [] Other** The WA State Public Disclosure Commission requires that we collect the following information for each person named on a check. Maximum contribution is $500/person.**Are you… [] Retired [] Unemployed [] Employed [] Other** **Employer’s Name(s): Occupation:****Employer’s Address:**Or, Include a business card with employment information on back page. |

For Online Contributions go to… www.neiltibott.com/Contribute

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| **Check Writing Instructions** |
| **[]** Please make checks payable to: **Tibbott For Edmonds** **[]**  Send Form and Check to: **TFE- PO Box 6250 – Edmonds, WA 98026** |
| **I Want to Help!** |
| **[] Volunteer [] Endorsement** Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**[] Yard Sign [] Talking with Friends and Neighbors****[] Host a Gathering [] Please Contact me** Ph# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Thank You!**