



DATE RECEIVED _____

FIRST NAME _____ LAST NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

OCCUPATION

SELF EMPLOYED? (Y/N)

YES

NAME OF BUSINESS _____

NO

NAME OF EMPLOYER _____

AMOUNT _____

CONTRIBUTION TYPE:

CHECK (Please make checks out to "Weaver for City Council 2014")

VISA

MASTERCARD

DISCOVER

AMERICAN EXPRESS

NON-MONETARY

Please Describe _____

BY MAKING THE ENCLOSED (OR SUBMITTED) CONTRIBUTION, YOU CERTIFY:

1. If this contribution is from an individual, I am a U.S. citizen or lawfully admitted permanent resident of the United States or if this contribution is from an organization, such as a partnership, that the organization is not a foreign government or foreign political party, is not organized under the laws of a foreign country, and does not have its principal place of business in a foreign country; 2. This contribution is not from a corporation; 3. This contribution is not from a political action committee; 4. This contribution is not from a currently registered federal lobbyist or foreign agent; 5. This contribution is not from a minor under the age of 16; 6. The funds I am donating are from me and are not being provided by another person or entity for the purpose of making this contribution.

If you are an individual contributing more than \$1,000.00 to this campaign, or a corporation of political action committee, then you must fill out another donation form, which can be obtained from our office by request.