



## Official Campaign Donation Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Employment Status:

Employed  Retired  Student  Unemployed  Self-employed  Homemaker

If employed, please list current employer and occupation:

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

### Please select amount enclosed:

\$10  \$20  \$50  \$100  \$250  \$500

Other: \_\_\_\_\_

### Opt-in:

I want to receive email communications from [VoteNoMeasureC.com](http://VoteNoMeasureC.com)

Please complete this form and mail with check to:

No on Measure C 2022  
5730 N First St #105-513  
Fresno, CA 93710

Please make checks payable to: No on Measure C 2022