

Vote Jim Martin: Contribution Form

You are not required to submit this form with your contribution; it is intended as an aid. Please make your check payable to **Campaign Fund Of Jim Martin** and mail with this form to:

**Citizens For Jim Martin
P.O. Box #4
Lake Elmo, Minnesota 55042**

If your contribution exceeds \$20, your name and address must be disclosed or we are required by Minnesota Statute § 10A.15, subdivision 1, to surrender your contribution to the Minnesota Campaign Finance & Public Disclosure Board. We must disclose your employer if your total contributions in 2010 exceed \$100, which are limited to \$500. To ensure we properly receive your contribution, please provide the following:

Name: _____

Address: _____

Employer: _____

(If self-employed, please provide your occupation)

**Thank You For Your Continued Support:
On 2 November 2010, Vote Jim Martin!**