

LARSON FOR STATE 08 CONTRIBUTORS' FORM

To comply with State laws, our campaign is required to gather all the information requested below. A separate form must be obtained from each contributor, even if they live in the same household.

Amount of Contribution	\$	Check below contribution type:	
<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	
Contributors Name:			
Residential Address			
City and State, Zip			
Telephone Number			
Email			
Are you 18 or older?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Employer			
Principal Occupation			
Are you a communicator lobbyist?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you the spouse or dependent child of a communicator lobbyist?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you the principal of a present or prospective state contractor?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
I hereby certify that I am NOT a principal of a state contractor or prospective state contractor, and that I am NOT a communicator lobbyist or an immediate family member of a communicator lobbyist.			Initial here please: _____

I understand that Connecticut law requires that a contribution be in my name and be from my own funds. I hereby affirm that this contribution is being made from my personal funds and is not being reimbursed in any manner, and not being made as a loan. I further certify that all of the information set forth above is true and accurate to the best of my knowledge.

Contributor's Signature

Date Contributed

Paid for By Larson for State 08, Gustavo Bajana, Treasurer, Approved by Timothy D. Larson



Please mail this completed form to:

Larson for State 08
Gustavo Bajana, Treasurer
681 Burnham Street
East Hartford, Connecticut 06108