

YES, JEFF, YOU HAVE MY SUPPORT!

- \$10 \$25 \$50
 \$100 \$600 Other: _____



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Employer: _____ Occupation: _____

Minnesota law requires political committees to collect and report the name, mailing address, occupation and name of employer of individuals whose donations exceed \$100 per calendar year. Contributions are not tax deductible, and municipal campaigns are not eligible for the PCR program. Maximum donation is \$600 per person.

Please make checks payable to "Kolb for Crystal Committee"
Mail this form with your check to:

Kolb for Crystal Committee
PO Box 28373
Crystal, MN 55428

Please check the box to confirm eligibility

I AFFIRM THAT THE FOLLOWING STATEMENTS ARE TRUE AND ACCURATE:

1. I am a United States citizen or a permanent resident alien.
2. This contribution is made from my own funds with a personal credit card, and not with a corporate credit card.
3. This contribution is not made from the treasury of a corporation, labor organization or national bank.
4. The funds I am donating are not being provided to me by another person or entity for the purpose of making this contribution.

Thank you for your support!