

# RETAIN DORIS HERRINGSHAW FOR COMMISSIONER

## Contribution Form

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*Please fill out all information. Thank you!*

### PERSONAL INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

### EMPLOYMENT INFORMATION *(This information is required by law)*

Employer \_\_\_\_\_

Occupation \_\_\_\_\_

*If you are retired, please write "retired" in the above lines. If you are not employed, write 'none' for both.*

### SELECT A CONTRIBUTION AMOUNT

- \$5
- \$10
- \$25
- \$50
- \$100
- \$250
- Other: \$ \_\_\_\_\_

*Please check if this is a recurring donation.*

### PAYMENT INFORMATION

Please make checks out to Citizens for Herringshaw and mail to:

Citizens For Herringshaw  
Bill Culbertson  
820 Pine Valley Drive  
Bowling Green, OH 43402

***THANK YOU!***

Contributions are limited to \$600 for an individual and \$3,600 from an organization.

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