

CONTRIBUTOR INFORMATION FORM

State law requires all information marked with an asterisk (). Thank you for your patience and understanding.*

Name* _____

Address* _____

City, State, Zip* _____

Occupation* _____

Employer* _____
(if self-employed, name of business)

Work Phone _____

Cell Phone _____

Fax _____

E-Mail (caps, please) _____

Amount Enclosed: \$500 \$250 \$100 \$50 Other \$ _____

Please make out checks to “Bernstein for Menlo Park Fire Board.” We are not set up to take credit or debit cards.

Mail with the information form, above, to:

**Bernstein for MP Fire Board
444 Oak Court
Menlo Park, CA 94025**

Thank you.

*Contributions are not tax deductible for federal or state income-tax purposes
Paid for by “Bernstein for Menlo Park Fire Board” ID# 1360277*