



**10th Congressional District of Pennsylvania
Campaign Contribution Form**
(Please attach a copy of your voter registration)

Information:

Last Name: _____ First Name: _____ Middle Initial: _____

Mailing Address (Address on voter registration form):

Building/Street: _____

City/Town: _____ State: _____ Zip Code: _____

Occupation: _____

- Check here if retired
- Check here if student

Employer: _____

- Check here if self employed

Certification: (Check each box that applies):

- I am a U.S. Citizen or lawful permanent resident
- This contribution is made with my own funds
- I am not a foreign national
- I am not making this contribution on behalf of another person
- I am not a federal contractor
- I understand federal contribution limits apply
 - \$3,500.00 per election – Primary (52 U.S.C. § 30116(a)(1)(A))
 - \$3,500.00 per election – General (52 U.S.C. § 30116(a)(1)(A))

Election Designation:

- Primary
- General
- Runoff (if applicable)

I, the above named contributor hereby certify that the information contained herein is true and correct to the best of my knowledge and belief.

/s/ _____ Date: _____

Mail Check or Money Order made out to: **“Shimp For Congress”**
950 Walnut Bottom Road, Suite 183
Carlisle, Pennsylvania 17015