

INDEPENDENT PARTY OF NEWTOWN CONTRIBUTION FORM

NAME: _____

ADDRESS: _____

CITY, STATE: _____ ZIP CODE: _____

AMOUNT \$ _____ CHK # _____ CASH \$ _____

Email _____

1. PERSONAL CHECKS MAY BE MADE OUT TO EITHER INDEPENDENT PARTY OF NEWTOWN OR IPN.
2. **BUSINESS CHECKS** ARE NOT PERMISSABLE BY THE SEEC
3. CASH CONTRIBUTIONS CANNOT EXCEED \$100 PER CONTRIBUTOR
4. AN INDIVIDUAL MAY CONTRIBUTE UP TO \$1000 PER CALENDER YEAR

For contributions of \$50 or more per year in the aggregate, the Treasurer must record the contributor's occupation, employer and lobbyist status. Please provide the information below.

OCCUPATION: _____ EMPLOYER: _____

Are you a lobbyist, spouse or dependent child of a lobbyist? YES _____ NO _____

Please mail your contribution to: Gianine Crowell, Treasurer
26 Canterbury La.
Sandy Hook, CT 06482

THANK YOU FOR YOUR CONTRIBUTION TO IPN