

**INDEPENDENT PARTY OF NEWTOWN
CONTRIBUTION FORM**

NAME: _____

ADDRESS: _____

CITY, STATE: _____

ZIP CODE: _____

AMOUNT \$ _____ CHK # _____ CASH _____

PERSONAL CHECKS MADE OUT TO IPN
BUSINESS CHECKS ARE NOT PERMISSABLE BY THE SEEC
CASH CONTRIBUTIONS CANNOT EXCEED \$50 PER CONTRIBUTOR
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
Promoting Accountability, Checks & Balances, Transparency in Gov't

