

Donor Form

www.VotePA.us

I would like to contribute to VotePA. My contribution is enclosed.

Name:				
Address:				
City: _		State:	ZIP:	Phone:
				Alt. Phone:
Email	address:			
	Please email me VoteF	PA updates or	n the voting situ <mark>atio</mark>	n.
	Please phone/e <mark>mail</mark> me for volunteer opportunities.			
	I would like to join VotePA as an active member.			
	I would like to join my local voting rights organization.			
	Please leave me alone, do your job, and I'll keep contributing.			
	I would like to recomme	end the follow	ving individuals as	potential members:
Comm	ents:			
Please return to:			eechwood Bouleva PA 15217-2767	rd

Thank you!

VotePA is a 501(c)(4) nonprofit organization. This status implies that because of political activity, donations are generally not tax-deductible. We thank you very much for your contribution.