

YES, I SUPPORT THOMAS NORMAN

() I AM MAILING IN A CHECK IN THE AMOUNT OF \$ _____
MAKE CHECK PAYABLE TO: "THOMAS NORMAN FOR COMMUNITY COLLEGE BOARD" (MAKE A COPY OF THIS PAGE, FILL OUT THE 'REQUIRED INFORMATION' BELOW AND MAIL CHECK AND COPY OF THIS PAGE TO:
1379 West Park Western Dr. Box 125 San Pedro, CA 90732

() I WOULD LIKE TO CHARGE MY CREDIT CARD IN THE AMOUNT OF \$ _____
MAKE A COPY OF THIS PAGE, FILL OUT THE 'REQUIRED INFORMATION' BELOW

REQUIRED INFORMATION FOR ALL DONORS: CHECK OR CREDIT CARD

PAYMENT NAME: _____ CELL

NUMBER: _____

ADDRESS: _____

_ OCCUPATION: _____ COMPANY

NAME: _____

REQUIRED INFORMATION TO CHARGE YOUR CREDIT CARD:

CREDIT CARD COMPANY: __ VISA __ MASTERCARD (NO OTHER CARDS ACCEPTED) CREDIT CARD EXPIRES ON ____ / ____ CID CODE ON BACK OF CARD: _____ CREDIT CARD BILLING

ADDRESS: _____ YOUR

SIGNATURE: _____ DATE: _____

CONTRIBUTIONS ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR INCOME TAX PURPOSES. THERE ARE NO CAMPAIGN CONTRIBUTION LIMITS. Paid for by Friends of Thomas Norman CA ID 1393078

CONTACT THE THOMAS NORMAN'S CAMPAIGN DIRECTLY:

EMAIL: Tom@normanfortrustee.com

TEL: (310)-243-2146

CUT AND PASTE ENVELOPE ADDRESS LABEL: THOMAS NORMAN,
1379 West Park Western Dr. Box 125 San Pedro, CA 90732