

# FAIRFIELD COUNTY DEMOCRATIC PARTY CONTRIBUTION FORM

*\*Required Fields*

## CONTRIBUTOR PERSONAL INFORMATION

FULL NAME OF CONTRIBUTOR\* \_\_\_\_\_

ADDRESS\* \_\_\_\_\_ CITY\* \_\_\_\_\_ STATE\* \_\_\_\_\_ ZIP\* \_\_\_\_\_

EMPLOYER\* \_\_\_\_\_

OCCUPATION\* \_\_\_\_\_

PHONE \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EMAIL \_\_\_\_\_

AMOUNT OF CONTRIBUTION\* \$ \_\_\_\_\_ (make checks payable to: FAIRFIELD COUNTY DEMOCRATIC PARTY)

## CONFIRM ELIGIBILITY

I confirm that the following statements are true and accurate:

1. I am a United States citizen or a permanent resident alien
2. This contribution is made from my own funds, and funds are not being provided to me by another person or entity for the purpose of making this contribution.
3. I am not a federal contractor.
4. I am at least eighteen years old.

SIGNATURE OF CONTRIBUTOR\* \_\_\_\_\_ DATE\* \_\_\_\_\_

**Please mail this form along with your contribution to:**

**FAIRFIELD COUNTY DEMOCRATIC PARTY  
3178 MASON ROAD NW  
CANAL WINCHESTER, OH 43110**

***Please do not send cash by mail***

**NOTE:** Ohio State law requires county political parties to report the name, mailing address, occupation and name of employer for each individual whose contributions aggregate in excess of \$100 in any election cycle. If you are self-employed, please enter "Self-Employed" and the name of your business, if any, in the Employer field and describe your line of work in the Occupation field. If you are retired, a homemaker, or not employed for any reason, please enter "N/A" in the Employer and Occupation fields. Contributions are not tax deductible as charitable contributions for Federal Income Tax purposes.