



# CONTRIBUTION FORM

Please read and complete this entire form.  
Then mail it with your contribution to:

**Jim Marchant for Congress**  
**2124 Crooked Pine Dr**  
**Las Vegas, NV 89134**

The Federal Election Commission requires that all of these statements are true for anyone contributing to the campaign:

- I am a US Citizen or Permanent Resident. - I am 18 years of age or older. - I am donating my own money. - I am not under contract with the Federal Government. - I am not making this contribution in the name of another person.

\_\_\_\_\_ \$11,200 (my spouse and me for Primary and General Election) \_\_\_\_\_ \$5600 (my spouse and me)  
\_\_\_\_\_ \$2800 \_\_\_\_\_ \$1000 \_\_\_\_\_ \$500 \_\_\_\_\_ \$250 \_\_\_\_\_ \$100 \_\_\_\_\_ Other Amount

Contributions to Jim Marchant for Congress are not tax deductible as charitable donations for federal **income tax** purposes. Federal law requires political committees to use their best efforts to obtain and report the name, mailing address, occupation and employer of each individual whose contributions aggregate in excess of \$200 in an election cycle. Contributions from corporations, foreign nationals and federal government contractors are prohibited. Under federal law, individuals may contribute a maximum of \$5,600. Couples may contribute \$11,200 per election cycle and may make contributions from a joint account, but each contributor must sign the check or a statement that accompanies the contribution describing the joint attribution. Qualified federal PACs may contribute a maximum of \$5,000 per election.

### Contributor Information:

Name(s) \_\_\_\_\_

Address, City, ST, ZIP: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

\*When making a joint contribution, the spouse's employer and occupation is also required by the Federal Election Commission.

\*Employer: \_\_\_\_\_ \*Occupation: \_\_\_\_\_

### Contribution Information:

Amount: \$ \_\_\_\_\_ Method:  Check  Cash  Credit Card (complete form)

Print cardholder's name as it appears on credit card: \_\_\_\_\_

Card #: \_\_\_\_\_ Security Code \_\_\_\_\_

Authorized signature: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Paid for by Jim Marchant for Congress. Contributions Not Tax Deductible.