



CONTRIBUTION INFORMATION:

Enclosed is my check in the amount of: \$ _____

(Make your check payable to: John MacMurray for Assembly - ID# **1281802**)

I wish to charge my contribution to my personal credit card in the amount of: \$ _____

VISA MASTERCARD AMERICAN EXPRESS

Name on Card (exactly how it appears): _____

Account Number: _____ Verification Code _____ Expiration Date: _____

Note: The verification code is a 3 number identifier on the back of your credit card.

Authorized Signature: _____

THE FOLLOWING INFORMATION IS REQUIRED BY STATE LAW:

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Occupation: _____

Employer: _____

Work Phone: _____

Home Phone: _____

Email Address (optional): _____

Please mail to:
John MacMurray for Assembly
PO Box 638
La Habra, CA 90633-0638

or
|
|
|

Please Fax to:
Private Fax: 562-691-6025

Maximum contribution is \$3,600 per person (\$7,200 per couple per election)

Paid for by John MacMurray for Assembly ID# 1281802