

GARY POLLAKUSKY



FOR LEGISLATOR
SUFFOLK COUNTY • 6TH DISTRICT

CAMPAIGN CONTRIBUTION FORM

___ **YES!** I WANT TO SUPPORT GARY POLLAKUSKY

___ **\$2,890.20 BUSINESS** (MAXIMUM ALLOWED BY CORPORATION, LABOR ORGANIZATION OR ASSOCIATION)

___ **\$2,890.20 INDIVIDUAL** (MAXIMUM ALLOWED BY AN INDIVIDUAL)

___ **\$2,500** ___ **\$1000** ___ **\$500**

___ **\$100** ___ **\$75** ___ **\$50** ___ **\$25**

___ **OTHER AMOUNT \$** _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMPLOYER/OCCUPATION: _____

WORK PHONE: _____ HOME PHONE: _____

EMAIL: _____

PLEASE MAKE CHECKS PAYABLE TO:

FRIENDS OF GARY POLLAKUSKY
53 WESTCHESTER DRIVE, ROCKY POINT, NY 11778

AMOUNT TO BE CHARGED: \$ _____ CREDIT CARD: MC VISA AMEX DISC

CREDIT CARD #: _____

NAME ON CARD: _____

EXP DATE: _____ / _____ CSV: _____