



**MONTANANS**  
FOR ELECTION REFORM

## CONTRIBUTION INFORMATION SHEET

Enclosed is my contribution of:

\$50    \$100    \$250    \$1,000    \$\_\_\_\_\_ other

I'd like to help by:

- Being named as a public endorser    Hosting a meeting to educate people about these reforms  
 Putting up a yard sign    Writing a letter to the editor    other \_\_\_\_\_

*Make Checks Payable to "Montanans for Election Reform Action Fund" and mail to  
P.O. Box 315, Helena, MT 59624*

### ALL CONTRIBUTORS MUST COMPLETE THE INFORMATION BELOW:

Full Name: \_\_\_\_\_

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

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

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

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

Contributions are not deductible as charitable contributions for federal income tax purposes. Montana law requires us to obtain and report the name, mailing address, occupation, and employer of individual contributors.

Montanans for Election Reform Action Fund may accept contributions of an unlimited amount from permissible sources. We do not accept contributions from minors (persons under the age of 18) or from foreign nationals (non-citizens without "green cards").

By signing below, you certify that you are a U.S. Citizen or lawfully admitted permanent U.S. resident who is at least 18 years old. You also certify that this contribution is being made with your own personal funds and not, for example, from a corporate or business check or with funds provided to you by another person in order to make this contribution. You also certify that you will not be reimbursed by anyone for making this contribution.

**Signature of contributor:** \_\_\_\_\_

**Date:** \_\_\_\_\_

PAID FOR BY MONTANANS FOR ELECTION REFORM ACTION FUND. BRUCE TUTVEDT,  
PRESIDENT. DOUG CAMPBELL, TREASURER. P.O. BOX 315, HELENA MT 59624