Bobby Shriver
Santa Monica City Council

HELP RE-ELECT BOBBY SHRIVER to the Santa Monica City Council

☐ I would like to help with the campaign. Please call or email me.

☐ You may use my/our name(s) in public endorsements.

☐ Please deliver a lawn or window sign to this location: _____

☐ I am willing to volunteer at headquarters:
_____ Days _____ Evenings _____ Weekdays _____ Weekends

☐ I am willing to walk in the neighborhood for Bobby: _____Weekdays _____ Weekends

☐ I would host an event or a neighborhood meeting.

☐ I would like to contribute. Enclosed is my donation of:

$250 ____ $100 ____ $50 ____ $25 ____ $10 ____ $5 ____ $____

Name _____ / _____
Print Signature

Occupation/Title***** _____

Company/Employer***** _____
If self-employed, enter name of business

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

****Information required by California law. Contributions without occupation and employer may have to be returned.***

Please make checks payable to:
Bobby Shriver for Santa Monica City Council
FPPC ID # 1268110

Please print this form and mail with check to:
Bobby Shriver for Santa Monica City Council
2118 Wilshire Blvd., Box 130
Santa Monica, CA 90403

Feel free to call Treasurer Mary Ellen Padilla at (323) 655-4065 with any questions.

Contributions are not tax deductible. Contributions to Santa Monica City Council candidates are limited to $250 per person or PAC per election. Couples may contribute $500 from a joint checking account if both parties sign the check. Corporations and unions may contribute. Foreign nationals without a green card may not contribute.

THANK YOU FOR YOUR SUPPORT! • TO LEARN MORE GO TO WWW.BOBBYSHRIVER.COM