



Steve

WILENSKY

District 2 Supervisor

www.stevewilensky.com

Donation Form

Enclosed is my contribution in the amount of \$ _____

Please make all checks payable to Citizens for Steve Wilensky

Note that contributions are not deductible for tax purposes.

Contributors of \$100 and up will be itemized on our publicly available financial disclosure report.

We can only accept cash contributions up to \$99, provided the donor identifies himself/herself.

Name (please print) _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Signature _____ Date _____

Occupation* _____

Employer Name* _____

Physical Address* _____

City* _____ State* _____ Zip* _____

*Occupation, employer and physical address are required for contributions of \$100 and over.

I live in District 2 (circle one): Yes No Not Sure

I authorize Steve Wilensky and his campaign committee to use my name to endorse Steve Wilensky for Calaveras County District 2 Supervisor. I understand my endorsement may be used in printed campaign literature, press releases, web sites and advertising materials for the duration of the campaign.

Yes! I'll help Steve! I will: (check all that apply)

- Walk my neighborhood
- Take Steve to a meeting of my organization
- Put up a yard sign
- Host a neighborhood gathering/meeting
- Help out on election day
- Make phone calls
- Help with fundraising
- Other: _____

Citizens for Steve Wilensky
P. O. Box 294
Mountain Ranch, CA 95246



**Steve
WILENSKY**
District 2 Supervisor
www.stevewilensky.com

Endorsement Form

I authorize Steve Wilensky and his campaign committee to use my name to endorse Steve Wilensky for Calaveras County District 2 Supervisor.

I understand my endorsement may be used in printed campaign literature, press releases, web sites and advertising materials for the duration of the campaign.

Name (please print) _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Phone _____ E-mail _____
 Signature _____ Date _____
 Occupation* _____
 Employer Name* _____
 Physical Address* _____
 City* _____ State* _____ Zip* _____
 I live in District 2 (circle one): Yes No Not Sure

*Occupation, employer and physical address are only required for contributions of \$100 and over.

Yes! I'll help Steve! I will: (check all that apply)

- Walk my neighborhood
- Take Steve to a meeting of my organization
- Put up a yard sign
- Host a neighborhood gathering/meeting
- Make a donation. Enclosed is my contribution of \$_____ (checks payable to Citizens for Steve Wilensky)
- Help out on election day
- Make phone calls
- Help with fundraising
- Other: _____

Contributions are not deductible for tax purposes. Donors of more than \$100 will be itemized on our publicly available financial disclosure report. We can only accept cash contributions up to \$99, provided the donor identifies himself/herself.

PLEASE PRINT, COMPLETE AND RETURN THIS FORM TO THE ADDRESS BELOW. Thank you for your support!

**Citizens for Steve Wilensky
 P. O. Box 294
 Mountain Ranch, CA 95246**



Steve

WILENSKY

District 2 Supervisor

www.stevewilensky.com

Volunteer Form

I would like to join Steve's campaign effort!

Name (please print) _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Signature _____ Date _____

I live in District 2 (circle one): Yes No Not Sure

I authorize Steve Wilensky and his campaign committee to use my name to endorse Steve Wilensky for Calaveras County District 2 Supervisor. I understand my endorsement may be used in printed campaign literature, press releases, web sites and advertising materials for the duration of the campaign.

Yes! I'll help Steve! I will: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Walk my neighborhood | <input type="checkbox"/> Help out on election day |
| <input type="checkbox"/> Take Steve to a meeting of my organization | <input type="checkbox"/> Make phone calls |
| <input type="checkbox"/> Put up a yard sign | <input type="checkbox"/> Help with fundraising |
| <input type="checkbox"/> Host a neighborhood gathering/meeting | <input type="checkbox"/> Other: _____ |

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