

## Donor Information Card - Yvonne Spicer for Mayor

Name \_\_\_\_\_ Donation (\$) \_\_\_\_\_

Street Address \_\_\_\_\_ Occupation \_\_\_\_\_

City/Town \_\_\_\_\_ Employer \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Date \_\_\_\_\_

eMail \_\_\_\_\_ Telephone \_\_\_\_\_

*Printed in house with donated labor*

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