



Washington Township
Democratic Committee

P.O. Box 265, Long Valley NJ 07853

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www.wtdcnj.org

SUPPORTER INFORMATION FORM

CONTACT INFORMATION

Name	
Address 1	
Address 2	
Town	
State / Zip Code	
Email	
Cell Phone	

EMPLOYER INFORMATION (For Election Law Compliance)

Occupation / Title	
Employee Name	
Address	
Town	
State / Zip Code	

Contribution rules:

1. I am at least eighteen years old.
2. This contribution is made from my own funds, and funds are not being provided to me by another person or entity for the purpose of making this contribution.
3. I am making this contribution with my own personal credit card and not with a corporate or business credit card or a card issued to another person.
4. I am a U.S. citizen or lawfully admitted permanent resident (i.e., green card holder).

Please return this form with your check payable to "Washington Township Democratic Committee" to the address above.

Thank you for supporting our efforts.