

Thank you for providing us with the following compliance information required by Connecticut State Statute.

Contributor Name: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Other Phone: _____ Home Phone: _____

Occupation: _____

Employer: _____

Email: _____

Are you a lobbyist? Yes No

Are you the spouse or dependent child of a lobbyist? Yes No

Are you the principal of a state contractor? Yes No

\$50 per person or \$500 per table of ten.

Please make checks payable to: DSCC – Non-federal

Contribution enclosed: \$ _____

I cannot attend, but enclosed is my contribution of \$ _____

Type of check: Individual State PAC

PAC Treasurer (If applicable) _____

No contribution can be accepted unless accompanied by a completed and signed statement.

I hereby certify and state that all of the information disclosed by me and set forth above on this contributor card is true and accurate to the best of my knowledge and belief and that I am NOT a principal of a state contractor, prospective state contractor, as defined C.G.S. 9-612, as amended by P.A. 07-1, nor am I a communicator lobbyist or a member of the "immediate family" of a communicator lobbyist.

(Signature of Contributor)

(Date)



Connecticut Democratic Women Leadership Awards Breakfast

R.S.V.P. by Tuesday, September 30, 2008

Name of Donor: _____

Number of persons: _____

Number of vegetarian meals: _____

Names of attendees:

Seating requests: _____