



Election law requires us to report the name, address, occupation and employer for each donor whose contributions for an individual candidate aggregate in excess of \$50 in an election cycle.

My signature below attests that this contribution is made by check from my personal funds and is not drawn on an account maintained by an incorporated entity. I am a US citizen and this contribution will not be reimbursed by another person.

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email address: _____

Employer (if retired, please so indicate): _____

Occupation (if retired, please so indicate): _____

Signature: _____

Date: _____

Please add my name to the official list of Campaign Supporters: YES NO

For Joint Contributions Only:

Full name of spouse: _____

Employer of spouse: _____

Occupation of spouse: _____

Signature of spouse: _____

Date: _____

Please add my name to the official list of Campaign Supporters: YES NO

**Please print this form and mail it to: John Clamp Campaign
8531 N. New Braunfels, Suite 203, San Antonio, TX 78217**

Make checks payable to the John Clamp Campaign

Paid for by the John Clamp Campaign
Jill Markey, Treasurer