



Contribution Form

Contributor Type: Individual Partnership/LLC Political Party Committee PAC Candidate Committee Other _____

Contributor _____
Prefix *First Name Middle Name/Initial *Last Name Suffix Spouse
Organization/PAC Name PAC ID

*Home Mailing Address: _____

*City: _____ *State: _____ *Zip: _____

Work Email: _____ Personal Email: _____

Home Tel: _____ Cell Phone: _____

*Employer: _____ *Occupation: _____

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Amount: \$4,800 \$2,400 \$1,000 \$500 \$250 \$100 \$50 Other \$ _____

Contribution Type: Check # _____ Money Order # _____

Credit Card Visa MC AmEx Disc Diners Club CC #: _____

Signature: _____ Ex. _____ Security Code: _____

Partnership Attributions:

Name/Address _____ \$

Name/Address _____ \$

Name/Address _____ \$

Name/Address _____ \$

Contributions should be made payable to "Scott Murphy for Congress" and mailed to:

Scott Murphy for Congress
5 South Side Dr #224
Clifton Park, NY 12065

*Contributions to Scott Murphy for Congress are not tax deductible. Federal law requires Scott Murphy for Congress to use best efforts to report name, address, employer, and occupation of all individuals who contribute over \$200 per election cycle.

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