

Please Join

Alex and Sara Crecca

for a Young Professionals reception in support of

Congressman Tom Udall

Candidate for US Senate

Friday, April 4th ~ 5:30 PM

At

Sophia's Place 6313 4th Street NW Albuquerque, NM 87107

Requested Contributions \$50 or \$100

Hors d'oeuvres prepared by Dennis Apodaca, Executive Chef and Owner

Directions: From I-25 North, exit Montano and turn left. Remain on Montano until 4th Street. At 4th Street, turn right. Sophia's Place will be just past Sadie's.

Please RSVP by Wednesday, April 2 to Tiffany Deinzer at 505.884.3055 or by email: tdeinzer@tomudall.com

Please make checks payable to Udall for Us All and bring with you to the event. Credit Card contributions can be made using the attached contribution form. Contributions to Udall for Us All are not tax-deductible for Federal income tax purposes, and are limited to \$2300 per individual (\$4600 per couple) per election. Federal multi-candidate PACs may contribute \$5000 per election.

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Contributions to Udall for Us All, Inc. cannot exceed \$2,300 for the Primary election and \$2,300 for the General election. Federal multicandidate PACs may contribute \$5,000 per election cycle. A husband and wife may contribute a maximum of \$4,600 by one check drawn from a joint account and signed by both individuals. Contributions are not tax-deductible for Federal income tax purposes.

Contributions to Udall for Us All, Inc. are subject to the prohibitions and limitations of the Federal Election Campaign Act. Contributions from corporations, national banks, federal contractors, and foreign nationals who are not admitted for permanent residence in the United States are prohibited. All contributions must be made from personal funds and may not be reimbursed or paid by any other person. PAC checks will be accepted.

YOU MUST ALSO SIGN BELOW

- By signing below, I affirm that I am making this contribution with my own personal funds, and I am not using funds provided by any other person.
- By signing below, I am affirming that I am making this contribution on my own personal credit card and not with a corporate or business card or a credit card issued to anyone else (except for my spouse).

Contributor Signature (REQUIRED):			
Second Contributor Signature for Join	nt Accounts (REQUIRED):		
\Box Please check this box if you would	l like this contribution split between both ac	count holders.	
PLEASE PROVIDE THE FOLLOW	WING INFORMATION		
Contributor(s) Name:			Amount:
Mailing Address:			
City:	State: _	Zip Code: _	
Occupation:	1	Employer:	
Home Phone:		Work Phone:	
Fax:	(Cell Phone:	
Email:	S	olicitor of contribution:	
IF YOU PREFER TO PAY BY CRI	EDIT CARD, PLEASE COMPLETE TH	IE FOLLOWING	
Credit Card Type:	_Visa MasterCardAmerican	Express	
Name on card:	Name on card: Amount:		
Billing Address (if differe	ent):		
Card Number:		Exp. Date	e:
whose contributions exceed \$200 in an	st efforts to collect and report the name, man election cycle. If this is a contribution free provide the requested information for both	om a husband and wife by one ch	
	payable to "Udall for Us All, Inc." Please buquerque, NM 87107 or fax to: (505) 883		
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