



PLEASE JOIN
Wes Golden,
Nick Bakas, Butch Keiser, Fred Mondragon & Dan Silva

AT A FUNDRAISING RECEPTION
for

Marty Chavez
CANDIDATE, N.M. 1ST CONGRESSIONAL DISTRICT

Co-Hosts:
Gabe Apodaca, Damon Maddox, Judy Pacheco, John Wertheim
and Jacob Winowich
(Host committee still being formed)

Thursday, November 10, 2011
5:30 – 7:00 PM

Imbibe
3101 Central Ave., NE
Albuquerque

Suggested Contribution:
Co-Host \$250 ~ Supporter \$100 ~ Friend \$50 ~ Guest \$25

RSVP to:
Janis Hartley (505) 412-2642 or janishartley@gmail.com

Contributions can be made payable and sent to:

“New Mexicans for Marty Chavez.”

PO Box 91208

Albuquerque, NM 87199

www.martychavez.com

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CONTRIBUTIONS CAN BE MADE PAYABLE AND SENT TO:

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*****November 10th, ABQ Event*****

Contributions to **New Mexicans for Marty Chavez** are limited to \$5,000 per individual (\$10,000 per couple) and federal multi-candidate PACs may contribute \$5,000 per election (\$10,000 maximum). A husband and wife may contribute a maximum of \$10,000 by one check drawn from a joint account and signed by both individuals.

Contributions to **New Mexicans for Marty Chavez** 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. Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation, and name of employer for individuals whose contributions exceed \$200 in an election cycle. If this is a contribution from a husband and wife by one check drawn from a joint account and signed by both individuals, please provide the requested information below for both individuals.

Name: _____ Amount: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Home Phone: _____ Work Phone: _____ Fax: _____
Cell Phone: _____
Email: _____

If you prefer to pay by credit card, please complete the following:

Credit Card Type: ___ Visa ___ MasterCard ___ American Express
Name on card: _____ Amount: _____
Billing Address (if different): _____
Card Number: _____ Security Code: _____ Exp. Date: _____

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): _____

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