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Pinal County Democrats

P.O. Box 807

Florence, AZ, 85132

Mail-in Donation Form

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Name of Employer: _____ Occupation: _____

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Name: _____

Name of Employer: _____ Occupation: _____

Thank you for your support!

Your contribution may be used in connection with state elections and is subject to the limitations and prohibitions of the Arizona Election Laws. State law requires us to request and report the name, address, occupation and name, of employer of individual whose contribution exceeds \$200 per calendar year. Contributions are not tax deductible for state or federal income tax purposes. Not authorized or paid for by any candidate or candidate committee.

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