

Individual Contribution Form for **Ben Holden 2015**,
Canton Board of Selectmen Campaign

Required Individual Contributor Information

Name: _____

Resident Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (Home) _____ (Other) _____

Total contributions (money and in-kind) from an individual are limited to \$250 per election*

- Check/Money Order Amount \$ _____
(Make out check to "Special Account for Ben in Canton")
- Credit Card Amount \$ _____
- Cash Amount \$ _____ (Only individual contributions of \$25.00 or less shall be accepted in cash.)
- In-kind Amount \$ _____ Description: _____

Are you a lobbyist? Yes _ No _

Are you the spouse or dependent child of a lobbyist? Yes _ No _

For contributions over \$100 only please indicate:

Employer _____

Occupation _____

Certification

I hereby certify and state that all information disclosed by me and set forth above on this contributor form is true and accurate to the best of my knowledge and that I am NOT a communicator lobbyist or the member of the immediate family of a communicator lobbyist.**

(Signature of Contributor) (Date)

*Any information received from a contributor towards the Ben Holden 2015 campaign, including, but not limited to, name, address and phone number, will not be used or shared for any commercial purposes.

** A communicator lobbyist is one who registers with the Offices of State Ethics. He/She receives or agrees to receive \$2,000 or more in a calendar year for lobbying.

PAID FOR BY BEN HOLDEN, 2015