



\_\_\_\_ Enclosed is my contribution of \$\_\_\_\_\_

Please make your check payable to:  
O'Connell 2006  
P.O. Box 1053  
Sacramento, CA 95812

Credit Card Payment: \_\_\_\_MC \_\_\_\_ Visa \_\_\_\_ AmEx

Credit Card # \_\_\_\_\_

V-Code (3 or 4 digits): \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Authorized Signature (must be same as name on card)

Signature: \_\_\_\_\_

Print Name on Card \_\_\_\_\_

Billing Address for this card: \_\_\_\_\_ Home \_\_\_\_\_ Business

Please indicate if this contribution is from a personal checking/credit card account:  
\_\_\_\_\_ Yes \_\_\_\_\_ No

The following information is required by law:

\*\* Contributions cannot be accepted without occupation and employer information\*\*

Name \_\_\_\_\_

Business Address (no PO Box): \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\*Occupation: \_\_\_\_\_ \* Employer/ Business Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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