

# CAMPAIGN DONATION FORM

Please complete and enclose this form with your check or cash donation.  
Checks should be made payable to *Sue Deigaard for HISD*.  
No corporate checks accepted.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ ALT. PHONE: \_\_\_\_\_  
Home Cell Office Home Cell Office

DONATION AMOUNT: \$ \_\_\_\_\_

- Please add me to the list of supporters.
- Make this a monthly recurring donation

*This information is required by law.*

EMPLOYER \_\_\_\_\_

OCCUPATION \_\_\_\_\_

- I am not a foreign national who lacks permanent residence in the United States.
- This contribution is made from my own funds, and not those of another.
- This contribution is not made from the funds of a corporation.

Sue Deigaard for HISD District V Trustee – Nellie Naidoo, Treasurer -- P.O. Box 20722, Houston, TX 77225