

CAMPAIGN KICKOFF

___ **Yes!** I will attend the campaign kickoff for Ald. Cappleman
___ Unfortunately, I cannot attend.

Enclosed is my contribution of \$ _____

- \$5,600 Chair \$2,500 Host \$1,000 Patron
 \$500 Sponsor \$150 Individual \$46 Ward Resident

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer & Occupation: _____

(w)Phone: _____ (h)Phone: _____

Email: _____

Make checks payable to
Citizens for Cappleman
PO Box 408761, Chicago, IL 60640
or pay online at

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Amount: \$ _____ Card Type: MC VISA AMEX DISC

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Card Number: _____

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