

\$17,400 (Couples Only) \$5,800	\$2,900 \$1	1,000	<b></b> \$
The maximum amount an individual may contribute to Hullihan for Te	xas is \$8,700. With the signature of each	n spouse or partner, a couple m	nay contribute up to \$17,400 out of joint fund
PAYMENT INFORMATION			
My/our personal check made payable	to "Hullihan for Texas" is	enclosed.	
Please charge my/our credit card:			
☐ Visa ☐ Mastercard ☐ Am	erican Express Disc	cover	
Card Number:		_ Exp:	
			CVC:
Billing Address:			
CONTRIBUTOR INFORMATION	ON (REQUIRED)		n and ampleyor of each individ
•	on (REQUIRED) collect and report the name n a two-year federal election	, address, occupatio on cycle. Please prov	vide the following information:
CONTRIBUTOR INFORMATION  Federal law requires us to use best efforts to complete whose aggregate contributions exceed \$200 in	on (REQUIRED) collect and report the name n a two-year federal election	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to contributions exceed \$200 in Name:  Address:	collect and report the name in a two-year federal election  *Signature:	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to complete whose aggregate contributions exceed \$200 in Name:  Address:  Number and street, or P.O. Box, plus city, state and ZIP	collect and report the name in a two-year federal election  *Signature:  Email:	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to complete whose aggregate contributions exceed \$200 in Name:  Address:  Number and street, or P.O. Box, plus city, state and ZIP  Phone:	collect and report the name in a two-year federal election  *Signature:  Email:	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to control whose aggregate contributions exceed \$200 in Name:  Address:  Number and street, or P.O. Box, plus city, state and ZIP  Phone:  Occupation:	collect and report the name in a two-year federal election  *Signature:  Email:  Employer:	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to control whose aggregate contributions exceed \$200 in Name:  Address:  Number and street, or P.O. Box, plus city, state and ZIP  Phone:  Occupation:  Spouse/Partner Information	collect and report the name in a two-year federal election  *Signature:  Email:  Employer:	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to compose aggregate contributions exceed \$200 in Name:  Address:  Number and street, or P.O. Box, plus city, state and ZIP  Phone:  Occupation:  Spouse/Partner Information  Name:  Address:	collect and report the name in a two-year federal election  *Signature:  Email:  Employer:  *Signature:	, address, occupatio on cycle. Please prov	vide the following information:
Federal law requires us to use best efforts to control whose aggregate contributions exceed \$200 in Name:  Address:  Number and street, or P.O. Box, plus city, state and ZIP  Phone:  Spouse/Partner Information  Name:  Address:  Address:  Number and street, or P.O. Box, plus city, state and ZIP	collect and report the name in a two-year federal election  *Signature:  Email:  *Signature:  Employer:  *Signature:	, address, occupatio on cycle. Please prov	vide the following information:

Paid for by Hullihan for Texas

Or scan/email it to finance@hullihanfortexas.com