



For New York City Council

(This contribution card must be completed only by the contributor.)

Transaction ID _____

Name _____

Contribution \$ _____

Home Address _____

☐ Check

☐ Money Order

☐ Cash

City _____

State _____

Zip _____

Email _____

Phone _____

To comply with Campaign Finance Board reporting requirements, give the following information:

Employer _____

Business Address _____

Occupation _____

City/State/Zip _____

I understand that State law requires that a contribution be in my name and be from my own funds. I hereby affirm that this contribution is being made from my personal funds, is not being reimbursed in any manner, and is not being made as a loan.

Contributor's Signature _____

Date of Contribution _____

If a contributor has business dealings with the City as defined in the Campaign Finance Act, such contributor may contribute only up to \$250 for city council, \$320 for borough president and \$400 for mayor, comptroller or public advocate.

If you are "doing business" with the City, please complete the following:

City Agency/Agencies _____

Name and Address of Doing Business Entity _____

Business Category (e.g., Contracts) _____

Relationship(s) (e.g., CEO) _____

Checks should be made payable to: Espinal for City Council PO box 80439 Brooklyn, NY 11208