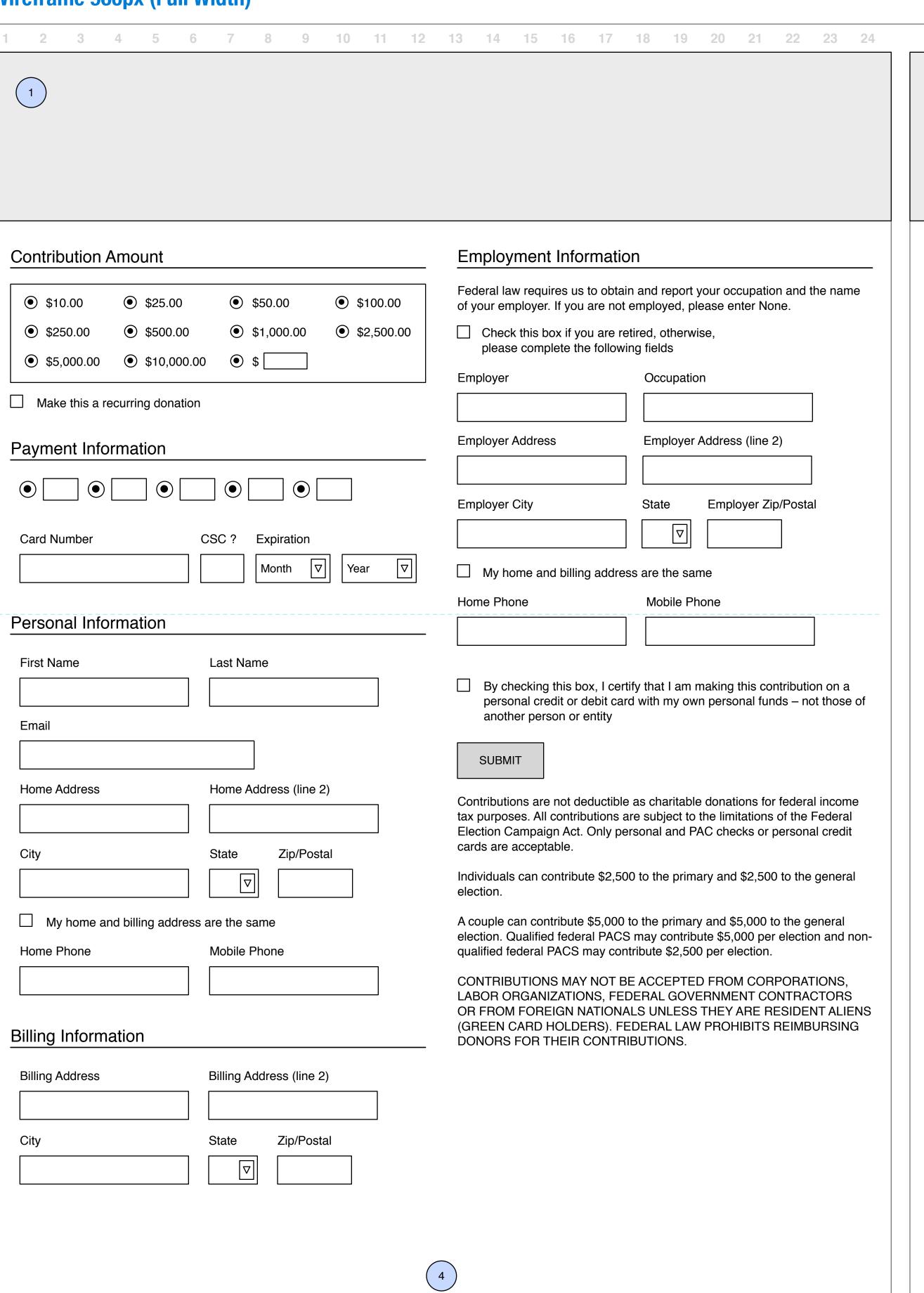
TV Donate

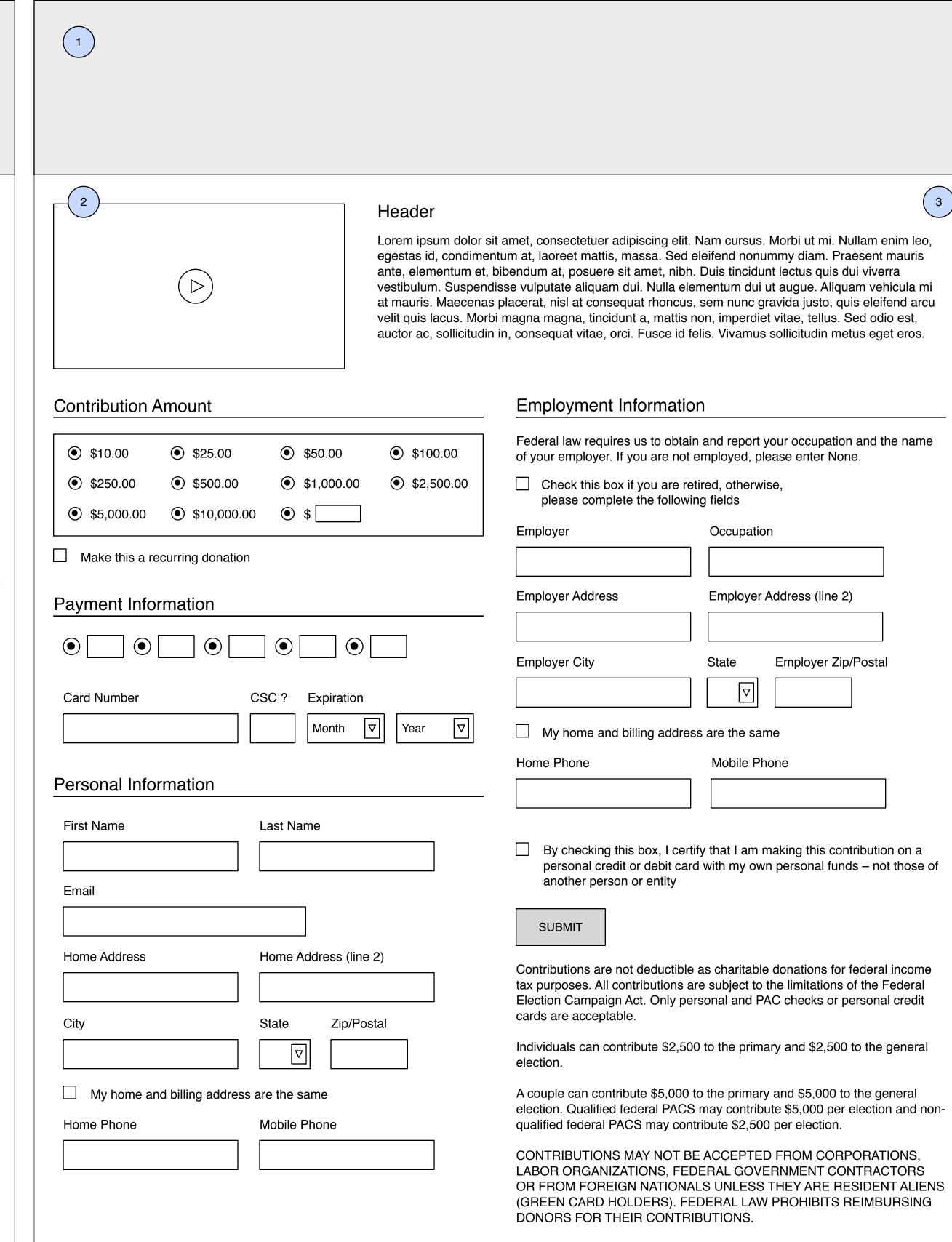
MODIFICATION DATE Tue May 15 2012
CREATOR D. Archibad Smart

FILE NAME TV-Donate-Wireframe-v1.graffle

DESCRIPTION Enter document description here

VERSION HISTORY Version history here





 $\left(\begin{array}{c}4\end{array}\right)$

Header

1.1 : Client Logo + Corporate Image

2. Video/Image

2.1 : This section be either a video or an image.

- Main Message
- 4. Form

(3)

Occupation

Mobile Phone

Employer Address (line 2)

Employer Zip/Postal

D. Archibad Smart

Modified **Tue May 15 2012**

TV Donate

Wireframe 960px (One Third)

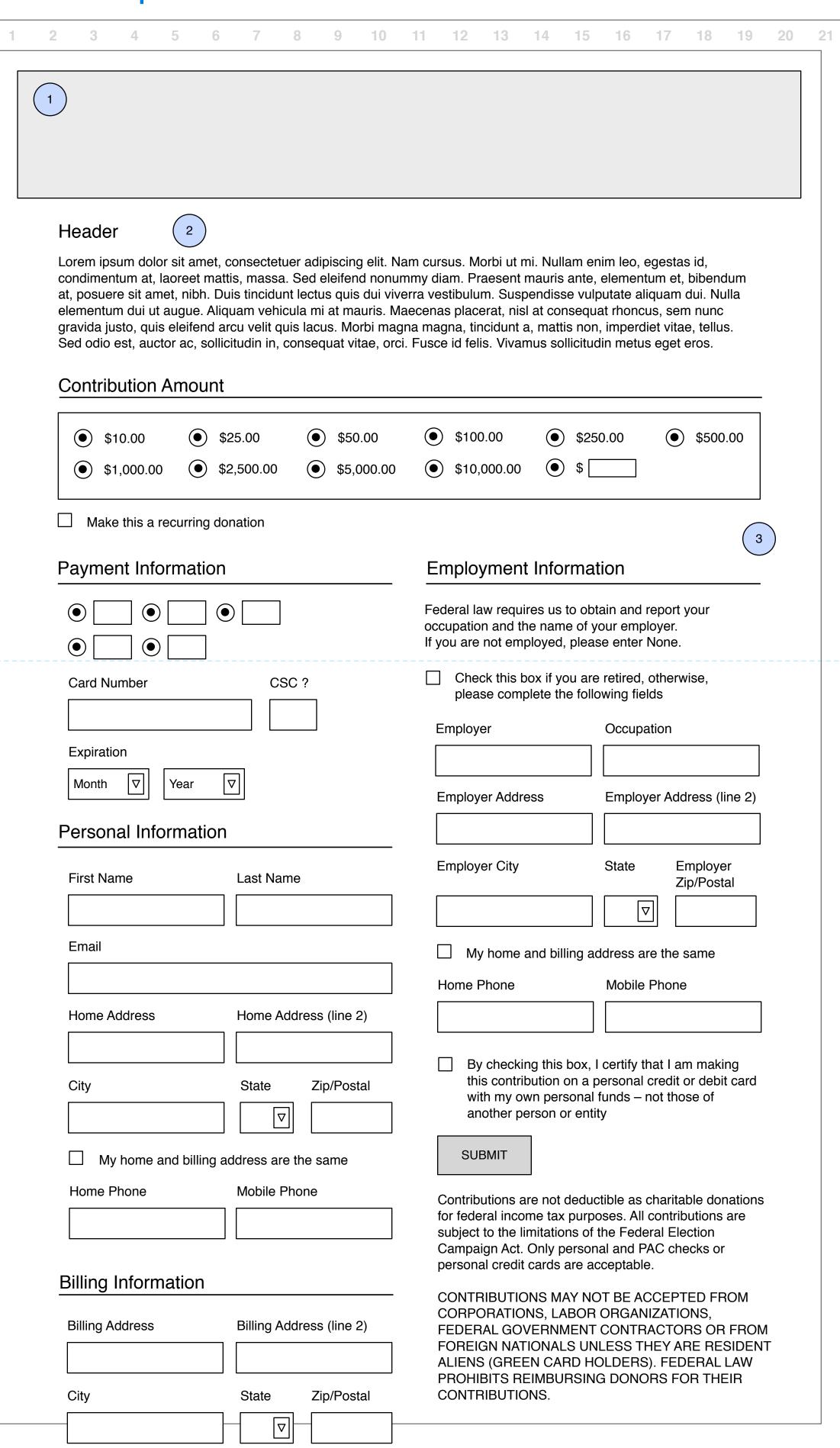
2 3 4 5	6 7 8 9 10	11 12	13 14	15	16 17	18	19	20	21	22	23	2
Contribution Amount												
		400.00) #050.00	<u> </u>				2				
\$10.00\$25.00\$500.00\$1,000.0		100.00 (5,000.00 (
		C										
☐ Make this a recurring donation	on											
Payment Information					Heade			3				_
					Lorem ips	um dolor					_	
Card Number	CSC 2 Evaluation				condimen nonummy	tum at, la diam. P	aoreet i raesen	mattis, r t mauris	massa. s ante, e	Sed ele	eifend tum et,	
Card Number	CSC ? Expiration Month	Year ∇			bibendum quis dui vi aliquam d	verra ve	stibulur	n. Susp	endiss	e vulpu	tate	itus
					vehicula r consequa	ni at mau t rhoncus	ıris. Ma s, sem	ecenas nunc gr	placer avida ju	at, nisl usto, qu	at ıis eleif	
Personal Information					arcu velit mattis nor sollicitudir	n, imperd	liet vita	e, tellus	. Sed o	dio est	, auctor	
First Name	Last Name				Vivamus							
Email												
Home Address	Home Address (line 2)											
City	State Zip/Postal											
	ss are the same Mobile Phone											
Flome Flome	Wobile I Hoffe		4									
Billing Information												
Billing Address	Billing Address (line 2)											
City	State Zip/Postal											

Employment Informatio	n			
Federal law requires us to obtain If you are not employed, please	and report your o	ccupation and th	ne name of you	ır employer.
☐ Check this box if you are re	tired, otherwise, pl	ease complete t	he following fie	elds
Employer	Occupation			
Employer Address	Employer Addre	ess (line 2)		
Employer City	State Emp	ployer Zip/Posta	I	
	abla			
☐ My home and billing addres	ss are the same			
Home Phone	Mobile Phone			
	L		l	
By checking this box, I certificate debit card with my own personal control of the card with my own personal card with my	-		=	
SUBMIT				
Contributions are not deductible contributions are subject to the li and PAC checks or personal cree	mitations of the Fe	ederal Election C		-
Individuals can contribute \$2,500) to the primary and	d \$2,500 to the	general election	n.
A couple can contribute \$5,000 to federal PACS may contribute \$5, contribute \$2,500 per election.		_		
CONTRIBUTIONS MAY NOT BE ORGANIZATIONS, FEDERAL G NATIONALS UNLESS THEY AR LAW PROHIBITS REIMBURSIN	OVERNMENT CO E RESIDENT ALIE	NTRACTORS C ENS (GREEN C	R FROM FOR ARD HOLDER	REIGN

- 1. Header1.1 : Client Logo + Corporate Image
- 2. Video/Image2.1 : This section be either a video or an image.
- 3. Main Message
- 4. Form

Creator D. Archibad Smart Modified **Tue May 15 2012**

Wireframe 810px



- 1. Header 1.1 : Client Logo + Corporate Image
- Main Message
- 3. Form

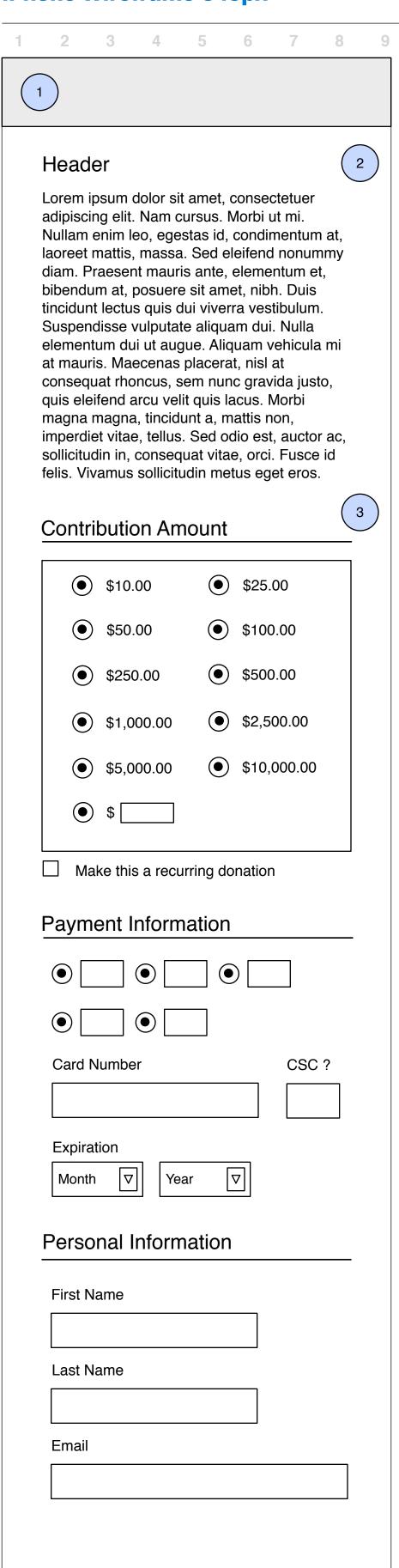
D. Archibad Smart

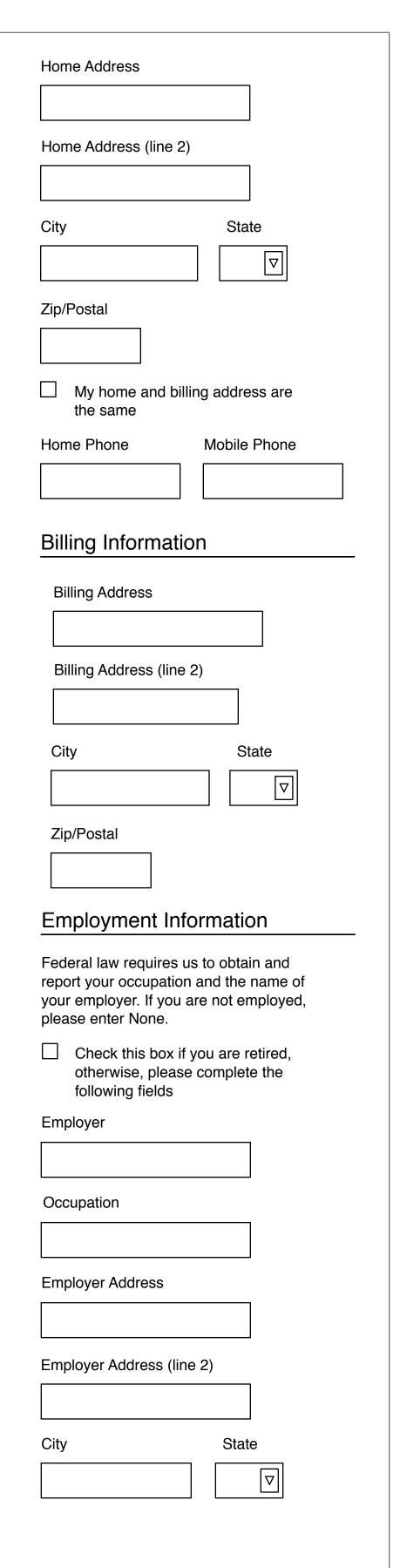
Modified **Tue May 15 2012**

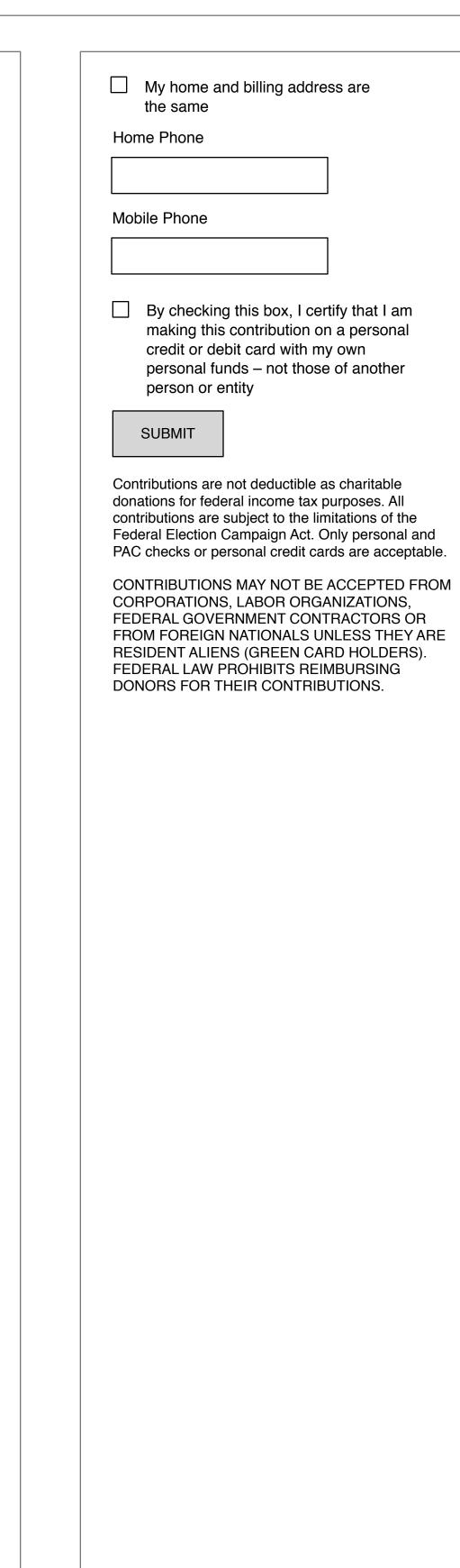
4/6

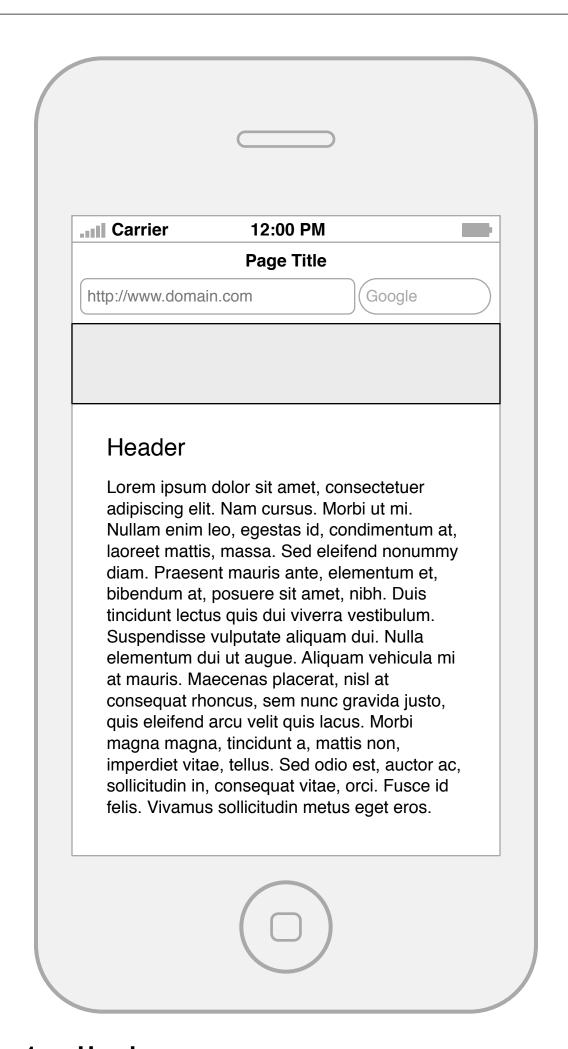
TV Donate

iPhone Wireframe 340px









1. Header

1.1 : Client Logo + Corporate Image

- 2. Main Message
- 3. Form

Creator D. Archibad Smart