



2010 Jefferson-Jackson Dinner

Vendor Table Form

Company/Organization Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person on Site: _____

Contact Telephone: (work) _____ (cell) _____ (fax) _____

Contact Email: _____

*The above information is required by Federal law.

Vendor Package: \$500.00
Includes: - Volunteer/Staff Room at the Westin Diplomat TBD
- Table in the Grand Hall Foyer

TOTAL CONTRIBUTION: \$_____

PAYMENT (Circle one): CHECK CREDIT/DEBIT CARD
IF CHECK, IS PAYMENT ATTACHED? (Circle one) YES NO

Checks should be made payable to the Florida Democratic Party, 214 South Bronough Street, Tallahassee, FL 32301.

CREDIT CARD AUTHORIZATION Circle One: MasterCard Visa American Express

Credit Card #: _____ Exp. Date: _____

Authorized Signature: _____ Security Code: _____

----- tear off receipt -----

RECEIPT FOR CONTRIBUTION

We look forward to seeing you on July 17th at the Westin Diplomat in Hollywood, FL. Table set-up begins at 9:00 am.

Vendor Package: \$500.00

TOTAL CONTRIBUTION: \$_____

Your contribution will be used in connection with federal elections, unless you designate otherwise, and are subject to the limitations and prohibitions of the Federal Election Campaign Act. To contribute you must be a United States Citizen or legal resident and at least 18 years of age.

214 South Bronough Street • Tallahassee, Florida 32301 • Phone 850 222 3411 • Fax 850 222 0916

Contributions are not tax deductible for federal income tax purposes.

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