POLITICAL CONTRIBUTOR INFORMATION* (as required by RI State Law)

Full Name of Contributor: (Please Print)

First	Middle	Last	Title
Home Address (S	treet, City, State, and Zip Code)		
Place Of Employ	nent	<u> </u>	<u> </u>
Address Of Empl	oyment (Street, City, State, and Zip	Code)	
Signature of Cont	ributor	<u>* </u>	

*campaign finance reform, RI General Law, 17-25-7