

**I WOULD LIKE TO RECEIVE:**

\_\_\_\_\_ Ambassador PowerPacks - each containing 5 Empowerment Kits with DVD (\$20 contribution per PowerPack covers cost of production)

My contribution to help support this initiative is \_\_\_\_\_ PowerPacks x \$20 = \$ \_\_\_\_\_

I would like to contribute more to Bret's general campaign. My additional contribution is:

- \$50       \$100       \$200
- \$500       Other \_\_\_\_\_

My total contribution is \$ \_\_\_\_\_  
(Completing the form below is required by law)

**PLEASE REVIEW THE FOLLOWING:**

1. Make checks payable to "Bret 2005 / Schundler for Governor" and send to 187 Mill Lane, Mountainside, NJ 07092
2. Contributions for the primary election are limited to \$3000 per person, corporation, P.C., P.A. or PAC.
3. If the contributor is an individual, the contributor must provide his or her occupation, employer and employer's address.
4. Contributions from a joint checking account will be allocated to the person signing the check unless both owners provide the required information and sign below.
5. A partnership may contribute a maximum of \$3000 per partner for the primary election. A partnership check must include each contributing partner's signature and address. A partner's total contribution through the partnership and personally, cannot exceed the \$3000 limit for the primary election.
6. Contributions of more than \$3000 from affiliated corporations are prohibited. (Two or more corporations are considered affiliated if any individual, corporation, partnership, company, association, or other entity owns directly or indirectly more than a 30% interest in the other such corporation.)
7. Contributions from industries regulated by the State of New Jersey and their affiliates are prohibited. (Regulated industries include banks, insurance companies, casinos, utilities, etc.)
8. Contributions are not tax deductible.

**PLEASE INDICATE WHICH OF THE FOLLOWING PERTAINS TO YOUR CONTRIBUTION:**

- Individual       Joint Account       Corporate       Partnership (attach allocation letter)       Sole Proprietor

**IMPORTANT: NEW JERSEY ELECTION LAW REQUIRES THAT ALL CONTRIBUTORS PROVIDE THE FOLLOWING INFORMATION:**

**YOUR COOPERATION COMPLETING THIS FORM IS REQUESTED.** INCOMPLETE FORMS OR SIGNATURES WILL REQUIRE VALUABLE FOLLOW UP TIME BY OUR STAFF AND MAY REQUIRE ADDITIONAL AND UNNECESSARY POSTAGE COSTS. PLEASE WRITE CLEARLY AND NEATLY TO AVOID ANY PROBLEMS.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**IF THE CONTRIBUTION IS FROM AN INDIVIDUAL, THE FOLLOWING INFORMATION IS ALSO REQUIRED:**

(if applicable)     Retired     Homemaker     Unemployed

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

**IF THE CONTRIBUTION IS FROM TWO INDIVIDUALS SHARING A JOINT ACCOUNT, BOTH PARTIES MUST COMPLETE AND SIGN:**

Amt. of Contribution: \_\_\_\_\_ Amt. of Contribution: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Employer Address: \_\_\_\_\_

**IF CONTRIBUTING BY CREDIT CARD:** (each spouse must provide their own credit card number that is associated with the card issued in their name)

Card Type (select one)               

Card Type (select one)               

Amount: \_\_\_\_\_ Amount: \_\_\_\_\_

Acct. Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Acct. Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card Holder Signature: \_\_\_\_\_ Card Holder Signature: \_\_\_\_\_

Please make checks payable to "Bret 2005 / Schundler for Governor"  
187 Mill Lane, Mountainside, NJ 07092 • 908-379-2738  
**PAID FOR BY BRET 2005 / SCHUNDLER FOR GOVERNOR: SAL RISALVATO, TREASURER**