



Contribution Form

Tony Andronas for Sheriff, please accept this contribution to the campaign so you can continue protecting families and our communities.

___ \$1,000 ___ \$500 ___ \$250 ___ \$100 ___ \$50 ___ \$25 Other \$ _____

Name: _____

Home Address: _____

City, St, Zip: _____

Phone: _____

E-mail: _____

Employer: _____ Occupation: _____

Employer Address: _____

*Corporate Contributions prohibited. Contributions are not tax deductible for income tax purposes.
State Campaign Finance Law requires the following be shared with the PA Department of State:
For Donations between \$50 and \$250: Name, Address, City, State, Zip Code
For Donations above \$250: Name, Address, City, State, Zip Code, Employer Name, Employer Address,
and Occupation*

Please make check payable to: **ANDRONAS FOR SHERIFF COMMITTEE**

Mail to: **ANDRONAS for Sheriff Committee**

Att: Tony Andronas
132 Dicio Street
Canonsburg, PA 15317

Thank you for your support!