



Contributor Card

Contributor's Full Name (please print): _____

Residential Street Address (no P.O boxes): _____

City/State/Zip: _____

Amount of Contribution: \$ _____

Form of payment: _____ **Date of Contribution:** _____

- Cash:** may not exceed \$99.99 (cash includes money orders and cashier checks)
- Non-Monetary:** include corresponding receipts (for purchases) or itemized invoice (for services donated)
- Check:** make check payable to **DJ Brookter For Supervisor 2026**
- Credit Card/Online payment system:** Card Number _____
 Name On Card: _____
 Expiration Date: _____ CVC: _____

For donors of at least \$100 (cumulatively), the following information is also required:

Employer*: _____ **Occupation*:** _____

If you are self-employed, please list the name of the entity that is on your paycheck.

Please list your line of work. i.e. "Businessperson" is not acceptable, please enter type of business instead.

*(*Required Information)*

We respectfully request that Partners of Partnerships and Members of LLC's contribute individually, instead of through respective business entities. Only contributions received from SF residents are eligible to be matched with public funds. By signing below and checking each of the boxes below, you confirm the following statements are true and accurate: My contribution is **not being reimbursed** by another person. (If you are not the true source of the contribution, inform us of the true source of the contribution.)

- My contribution is **not made by a corporation** (LLC's and LLP's included).
- My contribution **does not exceed \$500**. Related entities (a business and its owner, partnerships with the same general partner, a parent company and its subsidiaries and other affiliated entities) are subject to a single, 3
- I am **not a foreign national who lacks lawful permanent residence** in the United States.
- I am **not a City contractor**, or a director, officer, 10% shareholder, or subcontractor of a City contractor, whose contract required the approval of the [list any City elective office the candidate currently holds, the City elective office the candidate is currently seeking, and any state agency on whose board an appointee of the candidate serves] within the last twelve months or whose current bid or proposal will require such approval.
- I do **not** have a **financial interest in a land use matter** (\$5,000,000 or more, personal residence excluded) that is currently pending before the Board of Appeals, Board of Supervisors, Building Inspection Commission, Commission on Community Investment and Infrastructure, Historic Preservation Commission, Planning Commission, Port Commission, or Treasure Island Development Authority Board of Directors, nor have I had a financial interest in any such land use matter for which the relevant board or commission has rendered a final decision or ruling within the last twelve months (Prohibition applicable for contributions to officeholders, or candidates for Mayor, District Supervisor, City Attorney, or any individual holding such office who is running for any other City elective office).

Signature required of all contributors:

I understand that the law requires that a contribution be in my name and be from my own funds. I hereby affirm that I was not, nor, to my knowledge, was anyone else, reimbursed in any manner for this contribution; that this contribution is not being made as a loan; and that this contribution is being made from my personal funds or my personal account, which has no corporate or business affiliation.

X _____
Contributor's Signature Date