



LEVY/BOND CONTRIBUTION REQUEST FORM

Name of Committee _____

Name of Chairman _____

Address of Committee _____

Is this a Bond or Levy Election? _____

Election Date _____

Chapter making request _____

Has Chapter endorsed levy/bond? _____

Will Chapter carry out membership outreach activities as described in #5 of the coordinated campaign plan? Yes _____ No _____

Chapter President's signature _____

Today's date _____

*****PLEASE RETURN THIS FORM TO THE GOVERNMENTAL RELATIONS DEPARTMENT AT THE PSE STATE OFFICE. *****

PO Box 798
Auburn, WA 98071-0798
Fax: 253.876.7409