Faith Pron	nise					
NAME:	COUNTY:					
ADDRESS:	ESS:PHONE/TEXT:					
	ZIP:SENATE DISTRICT (if known):					
Occupation:	cupation: Employer:					
Email:						
CHURCH OR	CIVICS OF	RGANIZATIO	N:			
				_		
Signature Date						
	-		•		, circulating, and advertising?	
\$1	\$20	\$50	\$100	\$500	\$1,000 or more \$	
Mail Check to: O Paid For by Colorado Li Faith Pron	fe Initiative. Registo		,	O 80723		
NAME:	E: COUNTY:					
		PHONE/TEXT:				
CITY:		ZIP:SENATE DISTRICT: _(if known)				
Occupation:	Employer:					
Email:						
CHURCH OR	CIVICS OF	RGANIZATIO	N:			
Signature			 Date	_		

How much would you be willing to pledge to help with costs of printing, circulating, and advertising?

\$100

\$500

\$1,000 or more \$

Ways to Give: gotaheart.org

\$1

Mail Check to: Colorado Life Initiative PO Box 3 Brush, CO 80723

\$50

Paid For by Colorado Life Initiative. Registered Agent Angela Eicher.

\$20