



MAIL PAYMENT & FORM TO

Political Reporting Plus
Elen Asatryan City Council 2026
c/o Cine Ivery
1 W. Manchester Blvd., Suite 700, Inglewood,
CA 90301

COUNT ME IN!

- ☐ Enclosed is my check for ☐ Please charge my credit card for ☐ Cash (\$99 maximum)
☐ \$1,440 ☐ \$1,000 ☐ \$750 ☐ \$500 ☐ \$250 ☐ \$100 ☐ Other: \$_____

Please make checks payable to **ELEN ASATRYAN CITY COUNCIL 2026**

Contributions to Elen Asatryan City Council 2026 are not tax deductible for federal income tax purposes. Law permits contributions up to \$1,440.00 per individual, business or committee per election cycle. Contributions must be made from the donor's own funds and may not be reimbursed by any other person.

YES, I WILL

- ☐ Endorse Elen for State Assembly. Use my name publicly as a supporter.
☐ Host a coffee ☐ Host a fundraising event ☐ Volunteer ☐ Place Elen's sign at my home or business

The following information is required by California State laws for all contributions. We are prohibited from depositing any check or processing any payment without this information.

Name: _____

Street Address: _____

City/State/Zip Code: _____

Occupation: _____

Employer: _____

If Business, Responsible Officer's Name: _____

If Self-Employed, nature of business: _____

If Political Action Committee, ID number: _____

Amount of Check: \$_____ Personal _____ Business _____

This information is optional for reporting purposes:

Home Phone: _____ Business Phone: _____

Email _____

CREDIT CARD INFORMATION

***Both sections must be completed for credit card contributions. Please print clearly.**

- ☐ Master Card ☐ VISA ☐ American Express ☐ Discover

Name on Card: _____

Street Address on Bill: _____

City/State/Zip Code: _____

Card Number: _____

3 or 4 Digit Code: _____ Expiration Date: _____

Amount: \$_____ Signature: _____

- ☐ Personal ☐ Business ☐ PAC ☐ Organization