

IF YOU'D PREFER YOU CAN SEND YOUR CONTRIBUTION ALONG WITH THIS NOTE DETAILING YOUR NAME, MAILING ADDRESS, OCCUPATION, AND EMPLOYER TO:

CHRIS LEWIS FOR STATE REPRESENTATIVE PO Box 91436 LOUISVILLE, KY 40291

NAME:	
Address:	
Сітү:	_ STATE: ZIP CODE:
PHONE NUMBER: _	
EMPLOYER:	
OCCUPATION:	

CHRIS LEWIS FOR STATE REPRESENTATIVE, LINDA LEWIS, TREASURER

