

Emily Ann Ramos

CITY COUNCIL

Name:

Street Address:

City, State, Zip:

Law requires us to ask for your employer and occupation for donations of \$100 or more. If you don't have an employer or are retired, put N/A, and if you are self-employed, put "self-employed" in the employer field and describe your occupation.

Occupation:

Employer:

Submit this form with your check payable to: **Emily Ann Ramos for Council 2024**

Mail to:

PO Box 1026

Mountain View, CA 94042

Paid for by Emily Ann Ramos for Council 2024 - FPPC # Pending