

Please print this form, complete the following information and mail your contribution to:

Citizens for Will Kraus
612 SW Trailpark Circle
Lee's Summit, MO 64081

Please make checks payable to: **Citizens for Will Kraus**

State Law requires that we use our best efforts to report the following:

First Name: _____

Middle Name: _____

Last Name: _____

Occupation: _____

Employer: _____

Address1: _____

Address2: _____

City: _____

State: _____

Zip: _____

E-mail: _____

Home Phone: (____) ____ - _____

Business Phone: (____) ____ - _____

Dollar amount of your donation: \$ _____

(Please enter a whole dollar amount - Contributions are limited to \$300 per person)

Do you have any contractual relation with any Missouri State or Political Subdivision over \$500?

___ Yes ___ No

If yes, explain _____
