



Hala Ayala

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Full Name:

Street Address:

City:

State: Zip:

Phone Number:

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EMPLOYMENT INFORMATION

Occupation:

Employer:

Employer Address:

City:

State: Zip:

Please make checks payable to: **“Ayala for Delegate”**

Mail to: P.O. Box 7434, Woodbridge, VA 22195

Please include **“Sister District Project”** in the memo.

CONTRIBUTION LIMIT

There are no contribution limits in Virginia, but you still must report your contributions. Contributions to candidates and political committees are not tax deductible.