



Joe Danna for Sheriff Donation Contribution Form

First Name	Last Name	
Address		
City	State	Zip
Phone	Email	
Card Type: MasterCard VISA	Discover AM	MEX Other
Card Number		
Expiration Date	cvv	
I would like to make a donation in the	amount of \$	
Please select type of donation:		
One-Time Donation		
Recurring Contribution: Monthly	Quarterly An	nually
*State law requires best efforts to collect and report the full employer of individuals whose contributions equal or exceed charitable contributions for income tax purposes.	* * * * * * * * * * * * * * * * * * * *	,
By making a contribution, you are acknowledging that you lelect Joe Danna for Harris County Sheriff in 2024. Contribution advertising, travel, campaign staff and vendors. Donations a your contribution complies with all applicable laws and regundance at Joe@DannaforSheriff.com.	ons will be used to pay for campa and contributions are not refunda	aign expenses, including but not limited to: ble.You are responsible for ensuring that
Yes, I/we authorize this transaction.		
ature	Date	e
t Name	Date	a

Other
Payment
Options:



Visit DannaForSheriff.com

@SheriffJoeDanna

Verification Code: 1626



Make your personal or PAC check payable and mail to: Joe Danna for Sheriff Campaign P.O. Box 924033, Houston, TX 77292