



## **Mike Bost**

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Please join Steve Leon, Vince Brandys, Mark Esarey, Sam Forzley, Dennis Brtva, Mark Colip, Timothy Cundiff, Eric Botts, Eileen Bush, Brigette Colley, Geoffrey Goodfellow, Matthew Jones, Pete Kehoe, Brandon Lernor, Pamela Lowe, Charlotte Nielsen, Angela Oberreiter, Brian Plattner, Dennis Rabe, Jon Reid, Paul Stauder, Clint Taylor, and Leigh Ann Vanausdol

for a breakfast honoring

# **Congressman Mike Bost**

**Wednesday, May 3<sup>rd</sup>, 2023**

**7:30 a.m. – 9:00 a.m.**

**Illini Country Club**

**1601 Illini Rd.**

**Springfield, IL 62704**

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**Host: \$1,000**

**Co-Host: \$500**

**Attendee: \$250**

*\* Minimum of \$250 contribution requested*

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**RSVP to Valerie at 314-570-6517 or  
Valerie@mgsc Consulting LLC.net**

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Paid for by Mike Bost for Congress

Contributions are not deductible for federal income tax purposes. Federal Election laws requires us to report the name, address, occupation, and employer for contributions that aggregate in excess of \$200 in an election cycle. The maximum an individual may contribute is \$3,300 per election, with the primary and general elections treated separately. Federal multi-candidate PACs may contribute \$5,000 per election as above. Contributions from corporations, labor organizations, federal government contractors, and foreign nationals without permanent residency status ("green cards") are prohibited.



Mike can count on me/us to participate in the following:

\$3,300 Maximum Contribution (\$6,600 per couple)  
 \$2,000  \$1,000  \$500  Other

PLEASE MAKE CHECKS  
PAYABLE AND SEND TO:

MIKE BOST FOR CONGRESS  
PO BOX 1212 | MURPHYSBORO, IL 62966

For more information contact : Valerie Bechtel at 314-570-6517 or valerie@mgsconsultingllc.net

Federal law requires us to obtain and report the name, mailing address, occupation and name of employer for each individual whose contributions aggregate in excess of \$200 in an election cycle.

Name: Prefix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Last: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home #: \_\_\_\_\_

Cell#: \_\_\_\_\_ Work #: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

My signature below attests that this contribution is made by check or credit card from my personal funds and is not drawn on an account maintained by an incorporated entity. I am a US Citizen or permanent resident and this contribution will not be reimbursed by another person. In order for a contribution from a joint account to be attributed equally to two individuals, both individuals must sign this form.

Signature: \_\_\_\_\_

#### Spouse Contributor Information for Joint Contributions

Name: Prefix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Last: \_\_\_\_\_ Home #: \_\_\_\_\_

Work #: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

**If this contribution is intended to be a contribution from a couple, signature of spouse must be provided.**

Signature: \_\_\_\_\_

Visa  MasterCard  Discover  American Express

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Cardholder Name: \_\_\_\_\_

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