



\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone Alt. Phone

\_\_\_\_\_  
Email

National	\$30
State	\$25
<u>Local</u>	<u>\$20</u>
<b>Total</b>	<b>\$75</b>

Make checks payable to **Chillicothe-Ross LWV** and send to:

LWV Chillicothe-Ross  
PO Box 751  
Chillicothe, OH 45601

Pay full amount of \$75     Make 3 payments of \$25     **Student: only \$5!**

How do you prefer to be contacted?     Email     Phone     Text     Mail