

Robert A. Magovern

**For
Agawam City Council**

Name _____

Street _____

P.O. Box _____ Town _____ Zip _____

Home Telephone _____

Business Telephone _____

Occupation _____

(for contributions over \$200 we must have your occupation)

Employer _____

You may use my name in an endorsement

Signature

I will vote for you

I will be away and will vote absentee ballot
at Town Hall or by mail

I will send out _____ "Dear Friend" cards

I will put a sign on my lawn

I will give a coffee or cocktail party

I will make telephone calls

I will help at the polls

Here is my check made payable to:
The Magovern Committee

\$25 \$50 \$100 \$250 Other

Mail check to: The Magovern Committee

P.O. Box 546, Agawam, MA 01001-0546

www.robertmagovern.com

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Paid for by the Magovern Committee