HOSTS
Belinda & Art Keiser, Caroline and John Barca,
Sophia Eccleston, Dolly & Mike Rump, T.J. Long

cordially invite you to a fundraising reception benefitting
THE JIMMY PATRONIS CAMPAIGN AND
TREASURE FLORIDA

with special guest
FLORIDA’S CHIEF FINANCIAL OFFICER
JIMMY PATRONIS

Wednesday, October 19, 2022
5:30 PM
Maggiano’s Little Italy Restaurant
21090 St. Andrews Blvd.
Boca Raton, 33433

Please Make Checks Payable to
Jimmy Patronis Campaign
or donate online here:
joinjimmy.com/donate

Please Make Checks Payable to
Treasure Florida
or donate online here:
treasureflorida.org/donate

To RSVP contact TJ Long at t jlong@sec.edu/(754) 332-7368 OR
Natalie Alexander at Natalie@maxoutsolutions.com/(904) 318-6040

Contributions to the Jimmy Patronis Campaign are not tax deductible for federal income tax purposes. Contributions from foreign nationals are prohibited. The maximum campaign contribution is $3,000 per person or business entity.

Contributions to political committees do not have a monetary limit and are not tax deductible for federal income tax purposes. Contributions from foreign nationals are prohibited.

SPONSORED BY TREASURE FLORIDA  PAID BY JIMMY PATRONIS, REPUBLICAN, FOR CHIEF FINANCIAL OFFICER.
Please make check(s) payable to: “Jimmy Patronis for CFO” or “Treasure Florida”
Mail/Overnight To: 2640 Mitcham Drive, Tallahassee, FL 32308
Donate Online: www.joinjimmy.com/donate OR Treasureflorida.org/donate
Contact: Paige Primrose (904) 219-7322
Paige@maxoutsolutions.com
Credit Card Payment:
I, ______________________________, hereby authorize Treasure Florida / Jimmy Patronis Campaign (Please Circle) to charge my credit card as follows (please fill in):

Full Name:____________________________
Occupation:_________________________________
Address:_________________________ State:_________ Zip Code:_________
City:_________________________ Phone Number:________________
Email Address:________________________ Phone Number:________________

Contribution Amount:
☐ $1,000 ☐ $2,000 ☐ $3,000 ☐ $5,000 ☐ $10,000 ☐ Other: ______________________

Credit Card Information:
Card Type: Visa Mastercard Discover Amex
Name on Card:__________________________________________
Credit Card Number:_______________________________________
CV#:_______ Exp.:_________

*Please confirm whether you are using personal or business funds. If business, please list the business name: _____________________________________________
Billing Address if different from above:________________________________________
Signature:______________________________________ Date:_______________

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