

Drew Walker for Congress

Volunteer Form

Name:	Em	ail:			
		(Cell	(Cell)		
Address:	City:	County:	State:	ZIP:	
Occupation:					
Special Skills I can offer the camp	aign:				
\Box YES, I want to volunteer for V	Walker's Campaign!				
\Box YES, please send me emails from the campaign.			Send To or Contact:		
☐ YES, I want to donate to the campaign!			Drew Walker for Congress 201 South Mechanic Street Jackson, MI 49201		
☐ YES, I want Walker yard signs & materials!					
☐ YES, I want to endorse Drew		517-937-4211 DrewAlanWalker@yahoo.com			
☐ YES, I am a member of the Michigan Democratic Party.			www.Walker04.com		
☐ YES, I am an elected precinct	delegate.				
Best time for me to volunteer for I Interests & Concerns:		•	/Both)		

Signature: _____ Date: _____

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Drew Walker for Congress Volunteer Form

Name:	Em	nail:			
Telephone: (Home)	(Work)	(Cell	(Cell)		
Address:	City:	County:	State:	ZIP:	
Occupation:					
Special Skills I can offer the cam	paign:				
☐ YES, I want to volunteer for	Walker's Campaign!				
\Box YES, please send me emails from the campaign.			Send To or Contact: Drew Walker for Congress 201 South Mechanic Street		
☐ YES, I want to donate to the campaign!					
U YES, I want Walker yard sig		Jackson, MI 49201 517-937-4211 DrewAlanWalker@yahoo.com			
\Box YES, I want to endorse Drev					
\Box YES, I am a member of the \Box	YES, I am a member of the Michigan Democratic Party.			com	
☐ YES, I am an elected precine	et delegate.				
Best time for me to volunteer for	Drew: (Night/Day/Both) and	d (Weekend/Weekday	/Both)		
Interests & Concerns:					
Signature:	Date:				