

## **Set up Campaign Account**

| The financial agent MUST complete this form as soon as they set up the account. |
|---|
| Sign the form and fax it to the CEO right away. Toll free fax: 800.269.1125     |
| Constituency:   |
| Candidate:  |
|   |
| Declaration:  |
| I (financial agent name) for  |
| (candidate name) opened an account at   |
| (name of bank or other place that has the account)                              |
| Account name:   |
| Account number:   |
| I am the only person with signing authority for the account.                    |
| Financial Agent's signature:  |
| Date (wear / month / day):  |