

**Vote**  
**MARCH**  
*3rd*  
**2009**



*Elect*

**WILLIE BRIEN M.D.**

*Beverly Hills City Council*

To make a contribution to my campaign for Beverly Hills City Council, please make your check payable to "Willie Brien, M.D. for City Council" and mail with the following form to:

Willie Brien, M.D. for City Council  
9663 Santa Monica Blvd., #139  
Beverly Hills, CA 90210-4303

Willie Brien has accepted the voluntary spending limit. Maximum contribution limit is \$300 per person.

If you are making a contribution of \$100 or more, the California F.P.C.C. requires that you provide the following information: *please print*

**Vote**  
**Tuesday**  
**March 3rd**

Full Name: \_\_\_\_\_

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

City/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email (optional): \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer Name: \_\_\_\_\_

*(if self-employed list company name)*

Contributions to Willie Brien, M.D. for City Council, ID#1311434 are not tax deductible for income tax purposes. For information call (310) 661-0354 or email [campaign@electwilliebrien.com](mailto:campaign@electwilliebrien.com)

***Thank you for your generous support!***

***Dear Willie,***

***Yes, You can count on my/our support!***

- You may use my/our name as an endorser
- Please send me/us an Absentee Ballot
- We will put up a lawn sign
- We will give a coffee/cocktail party

Signature for endorsement \_\_\_\_\_