

NORA Endorsement Form for Individuals



TO: nora@drugpolicy.org, ph: (213) 382 6400

FROM:

FAX: (213) 382 6425

(OR MAIL: Drug Policy Alliance Network, 3470 Wilshire Blvd, Suite 618, Los Angeles CA 90010)

- I hereby endorse NORA, the Nonviolent Offender Rehabilitation Act of 2008, a ballot measure officially titled, "Nonviolent Offenders. Sentencing, Parole and Rehabilitation. Statute." *I understand that this allows the NORA Campaign to use my name in the initiative's promotional materials.*

PLEASE WRITE CLEARLY

Endorser Name/Title: _____

Endorser Signature: _____

Org. Affiliation: _____

Address/Phone/Email: _____

How would you like to be described in any literature of the campaign? _____

- I would suggest that the NORA Campaign contact the following people to support NORA:

Contact Name 1: _____

Address/Phone/Email: _____

Contact Name 2: _____

Address/Phone/Email: _____

- I would like to do more to support NORA. Please send me information on:

Writing an article for our newsletter or local paper

Organizing other groups to become endorsers

Holding a fund-raising event

Other ways to help

NORA Campaign, sponsored by Campaign for New Drug Policies and Drug Policy Alliance Network • ID# 1302707

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Official Correspondence Only: 555 Capitol Mall, Suite 1425 • Sacramento, CA 95814