

San Francisco Small Business Advocates

Small Business

BIG IMPACT!

Membership Application

Name: _____

Business Name: _____

Position: _____

Address: _____

City, State, ZIP+4: _____

Telephone: _____ Fax Number: _____

E-mail: _____

Type of Business: _____ Number of Employees: _____

With what professional and community organizations are you affiliated? _____

What issues are important to you? _____

Have you been involved in any advocacy surrounding these issues? Which ones? How?

Membership Category: Supporting Member (non-voting) at \$50.

Please send completed application along with your payment to:

San Francisco Small Business Advocates
P. O. Box 225036
San Francisco CA 94122

Questions: 415-731-2859 Fax: 415-564-7879

The San Francisco Small
Business Advocates is a
Political Action Committee

Identification #1226595

All contributions are not
tax deductible.