



## Legislative Visit Report

- \* Your first name: \* Your last name:
- \* Your email address:
- \* What is the name of the legislator whose office you visited? \*
- \* Which legislative district do you live in?
- \* When was your visit? Date:    /    /    Time:
- \* Which constituents were in the meeting with you? Names and contact information, please.
  
- \* Names of legislator and staff in the meeting? Please list all.
  
- \* Issue(s) explored, legislator's position?

Related bills?

- \* Who will follow up with the legislator or staffer by email?

Do you have suggestions to improve the visit process?

\* required