NALC Lobbying Report

Date of visit: ___________

Member of Congress Visited: ___________

State/Congressional District: ___________

Location of visit: _______________

Was the member of Congress present? Yes  No

Staff name(s) and contact information:
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Names of other letter carriers in attendance:
__________________________________________________________________________________________________
__________________________________________________________________________________________________

1. What was discussed in the meeting?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

2. Did you discuss any of our resolutions? What was the response?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

3. Did you discuss any local issues in the meeting?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

4. Is there anything that came up in the meeting that National should follow up on?
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Form completed by: _____________________________

Contact phone number: ___________________________

Completed form should be mailed to NALC Headquarters, 100 Indiana Ave., N.W., Washington DC 20001-2144