

# DRLD 2024 LEGISLATIVE ADVOCACY FORM

*Use this form to help you plan your visit with your legislator on or after DRLD. You can even take this with you to your appointment.*

Legislator Name

Office Phone Number

Office #

My appointment is on:

I am meeting my legislator:

In their office

In our district

Both

I looked up my legislator and thought this was interesting:

I want to make sure my legislator knows this about my life (*include where you live, work, any barriers you encounter, how you spend the day, etc.*):

How can your legislator help you?

Thank them for their time and service. Tell them that you hope to stay in touch in the future. Leave your contact information so they can reach you in the future.