



**LEGISLATIVE CONTACT FORM**  
**National Association of Insurance and Financial Advisors – California**

To assist the National Association of Insurance and Financial Advisors – California (NAIFA-California) in its efforts to influence legislation, NAIFA-California maintains a grassroots member database and provides its members with the tools necessary to communicate their views to their representatives and help them build strong relationships with their Legislators.

In order to best serve NAIFA-California and the grassroots effort, NAIFA-California needs to gather every agent's legislative contact information. We realize some of you may have completed a similar form recently; however, in the era of term limits it is necessary to continually collect the "key" contact information.

Please complete this form and return it as soon as possible.  
We appreciate you taking the time to complete this important form. Thank you.

Your name: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Please indicate "key contacts" with government officials that you may have and the relationship with that "key contact:"

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

Would you be interested in participating in meet and greets with your Legislators on behalf of NAIFA-California? We encourage agents' participation in the meet and greets, as they are a great way to build or enhance a relationship with your Representative(s).

YES                      NO

Has your contact information (address, phone/fax number, etc.) changed in the last year? If so, please provide us with your current contact information. *Please note:* We ask for your home address for the purpose of matching you to your current Legislative representative.

Home Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Fax: \_\_\_\_\_

Agency Name & Address: \_\_\_\_\_

\_\_\_\_\_

Office Phone: \_\_\_\_\_

Office Fax: \_\_\_\_\_