

**U.S. SENATE**

U.S. Senate District \_\_\_\_\_

Senator: \_\_\_\_\_

Washington Office: Room: \_\_\_\_\_ Senate Office Building: \_\_\_\_\_

Washington, DC \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Appointments contact: \_\_\_\_\_

District Office: Address: \_\_\_\_\_

City: \_\_\_\_\_ State: NY Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Committee Memberships: \_\_\_\_\_

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**U.S. HOUSE OF REPRESENTATIVES**

U.S. Congressional District: \_\_\_\_\_

Representative: \_\_\_\_\_

Washington Office: Room: \_\_\_\_\_ Senate Office Building: \_\_\_\_\_

Washington, DC \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Appointments contact: \_\_\_\_\_

District Office: Address: \_\_\_\_\_

City: \_\_\_\_\_ State: NY Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Committee Memberships: \_\_\_\_\_

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**NEW YORK STATE SENATE**

NY State Senate District: \_\_\_\_\_

Senator: \_\_\_\_\_

Albany Office: Room: \_\_\_\_\_ Senate Office Building: \_\_\_\_\_

Albany, NY \_\_\_\_\_

Phone: (518) \_\_\_\_\_ Fax: (518) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Appointments contact: \_\_\_\_\_

District Office: Address: \_\_\_\_\_

City: \_\_\_\_\_ State: NY Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Committee Memberships: \_\_\_\_\_

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**NEW YORK STATE ASSEMBLY REPRESENTATIVE**

NY State Assembly District: \_\_\_\_\_

Representative: \_\_\_\_\_

Albany Office: Room: \_\_\_\_\_ Legislative Office Building: \_\_\_\_\_

Albany, NY \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Appointments contact: \_\_\_\_\_

District Office: Address: \_\_\_\_\_

City: \_\_\_\_\_ State: NY Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Committee Memberships: \_\_\_\_\_

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**COUNTY**

County District: \_\_\_\_\_

County Legislator: \_\_\_\_\_

County Office:      Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Committee Memberships: \_\_\_\_\_

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**CITY / TOWN / VILLAGE**

Voting District: \_\_\_\_\_

Mayor/Supervisor: \_\_\_\_\_

Representative: \_\_\_\_\_

Office: Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Committee Memberships: \_\_\_\_\_

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