

Public Opinion Message

YOUR Legislative Information Office (LIO) **YOUR.LIO@akleg.gov**
YOUR ADDRESS **TOWN, AK ZIP** Phone **000-0000** Fax **000-0000**

This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

From: Please **PRINT** the information below. This form **must be signed** by the sender.

Mr. / Ms. / Mrs.	First name	M.I.	Last name	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number
Mailing address				Zip code
Residence (street) address if different from mailing address				Zip code
Email address		Signature		Date

To: Put a in the appropriate box(es).

	<u>Committees</u>	<u>House members</u>	<u>Senate members</u>																																																																																																																																															
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Subject: Fill out the boxes below OR enter a Subject.

HB <u>or</u> SB	Bill number	and check one:	<input type="checkbox"/>	Support				
			<input type="checkbox"/>	Oppose	OR	enter a general Subject		
			<input type="checkbox"/>	Amend		(LIO staff may modify):		

Message: Your **PRINTED** message cannot exceed 50 words or contain any vulgar language.

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