

NetLob SIGN-UP SHEET

Name: _____

Position: _____

Township: _____

County: _____

Mailing Address: _____

Email: _____

Daytime Tel. # _____

Fax # _____

If you have a personal relationship (such as relative, friend, classmate, political connection, etc.) with the legislator, please check the box below.

Name of U.S. Representative/Senator: _____

Yes, I am known to the legislator by way of _____

I have a special knowledge/interest about this issue/area: _____

Please Return to: Michigan Townships Association
512 Westshire Drive
PO Box 80078
Lansing MI 48908-0078

Fax Number: (517) 321-8908