

**COUNTY LEGISLATIVE REPORT FORM
2023-2024**

REPORTING DATES: November 10, 2023 April 10, 2024

County Name: _____ District _____

Name of Person Reporting: _____ Daytime Phone: _____

Address: _____

Email Address: _____

_____ County does not have a Legislative Chairman

Check the activities/programs that the unit completed. Please describe activities/projects carried out in your unit. Additional paper or the back of this form may be used.

LOCAL ELECTED OFFICIALS:

____ # of phone calls to
____ # of emails & letters sent to
____ # of personal visits to

STATE ELECTED OFFICIALS:

____ # of phone calls to
____ # of emails & letters sent to
____ # of personal visits to

NATIONAL ELECTED OFFICIALS:

____ # of phone calls to
____ # of emails & letters sent to
____ # of personal visits to

POST FAMILY MEMBERS:

____ # of Post Family Functions shared leg. Issues
____ # of Post Events elected officials attended

SUBSCRIPTIONS:

____ # to *The Dispatch*
____ # to Auxiliary Legislative e-newsletter
____ # to American Legion e-newsletter
____ # to www.capwiz.com/legion

EVENTS:

____ Coordinate/Attend "Meet the Candidate"
____ Coordinate/Attend "Town Hall Meeting"
____ Coordinate/Attend a Legislative Reception
____ Attend "Hill Day" in Albany
____ Attend Washington DC Conference

RESPONSE:

Y N Did you receive a response from an official?
If yes, how many? _____ From whom? _____

SUMMARY QUESTIONS:

1. What is the total number of hours donated by your Unit to the legislative program? _____
 2. What is the total dollar amount expended by your Unit to promote the Legislative program? _____
 3. What are the Legislative issues your County has been focusing on? _____
- What other Legislative issues are veterans in your area concerned with? _____

**** No activities, hours, expenses, donations, or dollars spent for this committee are to be included in the Impact Report ****

PLEASE SEND TO DEPARTMENT CHAIRPERSON
KEEP A COPY FOR YOUR RECORDS

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