



## U.S. Congressman Sam Graves Meeting Request Form

Please complete this meeting request form and return, preferably by e-mail or fax.

---

**Please indicate where this meeting will take place:**

Washington, DC  Missouri (specify: \_\_\_\_\_)  Other: \_\_\_\_\_

**Organization Information:**

Name: \_\_\_\_\_

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

City, State: \_\_\_\_\_

Describe Organization (Briefly): \_\_\_\_\_

---

**Meeting Information:**

Requested date and time of meeting: \_\_\_\_\_

Purpose of meeting and issues (please list specific legislation) to be discussed: \_\_\_\_\_

---

Please list the name, title, and hometown (city and county in Missouri) for each participant:

\_\_\_\_\_  
\_\_\_\_\_

**Contact Information:**

Name: \_\_\_\_\_

Business/Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Please return to Buffy Smith, Scheduler: 113 Blue Jay Drive, Suite 100, Liberty, Missouri 64068  
(816) 792-3976 (phone); (816) 792-0694 (fax); buffy.smith@mail.house.gov