**2019-2020 FSBA LEGISLATIVE COMMITTEE REPRESENTATIVE**

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**SCHOOL DISTRICT:**  Click here to enter text.

**LEGISLATIVE COMMITTEE REPRESENTATIVE:** Click here to enter text.

**Address:** Click here to enter text.

**Phone:** Click here to enter text. **Cell Phone:** Click here to enter text.

 **Email:** Click here to enter text.

**Other contact information:** Click here to enter text.

**ALTERNATE:** Click here to enter text.

**Address:** Click here to enter text.

**Phone:** Click here to enter text. **Cell Phone:** Click here to enter text.

**Email:** Click here to enter text.

**Other contact information:** Click here to enter text.

**Name of person completing this form:** Click here to enter text.

**Position:** Click here to enter text. **Phone:** Click here to enter text.

**Email:** Click here to enter text.

Once you have completed the form, save it to your computer, and then attach it to an email to Ruth Melton at melton@fsba.org. If you prefer, you may mail it to 203 South Monroe Street, Tallahassee, FL 32301. Please complete and submit this form by **July 15, 2019**. If you have questions or concerns, please contact Ruth Melton at the FSBA office at 850/414-2578 or at melton@fsba.org.