



House Committee on Redistricting
 402 House Office Building
 402 South Monroe Street
 Tallahassee, FL 32399-1300

Please Provide Completed Form To:
 help@floridaredistricting.gov



Senate Committee on Reapportionment
 2000 The Capitol
 404 South Monroe Street
 Tallahassee, FL 32399-1100

*Field is required.

Prefix _____ *First Name _____ *Last Name _____ Suffix _____

Organization Name (if applicable) _____

*Your Address _____ *City _____ *State _____ *Zip _____

*Your County _____ Your Email _____

*Your Phone Number _____

*Have you received compensation or anything of value (travel, meals, lodging, etc.) from any groups or organizations that have an interest in redistricting as part of, or in exchange for, your comments, suggestions, or map?

[] YES [] NO

If YES, please list what you received and who provided it to you below:

List the name of every person(s), group(s), or organization(s) you collaborated with on your comment, suggestion, or submitted map below:

By submitting this form, I acknowledge and agree to the following terms and conditions:

[] YES, I understand that my comments, suggestions, or map submission may be displayed on www.FloridaRedistricting.gov or other public websites maintained by the Florida Legislature.

[] YES, I understand that my communications with the Florida Legislature, including this form and any submitted materials, are subject to public records laws in Florida.

