



From the office of Congressman Bill Keating
Massachusetts' 10th Congressional District

MEETING REQUEST FORM

TODAY'S DATE: _____

INDIVIDUAL/
ORGANIZATION: _____

MEETING DATE: _____ DESIRED TIME: _____

LOCATION: _____

INDIVIDUALS
ATTENDING: _____

TOPIC: _____

CONTACT
INFORMATION: (Name) _____

(Phone Number) _____

(Email) _____

ADDITIONAL
INFORMATION: _____

**Please send the completed form to Adair Gregory at:
Adair.Gregory@mail.house.gov or fax # (202) 225-5658
If you have any questions, please call (202) 225-3111.**