



# Office of Senator **Dianne Feinstein**

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## **COPY OF BILL REQUEST**

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**DIRECTIONS:** Please fill out all fields on the form below and fax to: **(202) 228-3954** or mail to:

**Senator Dianne Feinstein  
Attn: Copy of Bill Request  
331 Hart Senate Office Bldg.  
Washington, DC 20510**

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

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

City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Description of legislation or bill number:  
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