



National Association of Police Organizations

Lobby Capitol Hill

MGM National Harbor Hotel

Washington, D.C.

May 13, 2020

Please join NAPO Wednesday, May 13, 2020 for our Annual Lobby Day. Use this opportunity to lobby Congressional Representatives & Senators on behalf of your members concerning the issues which affect law enforcement. Prior to lobbying Capitol Hill, attend NAPO's Legislative Breakfast for an update on NAPO's legislative priorities, results to date from the 115th Congress, and to receive handouts to use during Hill visits.

While on Capitol Hill, be sure to stop by NAPO's Legislative Awards Luncheon, where several Representatives and Senators will be recognized for their continued support of Law Enforcement.

To have NAPO set up your Congressional meetings please contact Andy Edmiston, NAPO's Director of Governmental Affairs, by May 1, 2020 at aedmiston@napo.org or (703) 549-0775.

Registration Fee of \$150.00 per person includes the Legislative Breakfast Meeting, Awards Luncheon and all Materials.

Advanced Registration is required. Fax registration to NAPO at (703) 684 - 0515 or email Eloranger@napo.org.

Registration is also available on line at www.napo.org

Registration/Payment Deadline Monday, May 4

Registration

Schedule of Events May 13

Registration	MGM National Harbor	8:45 a.m. - 9:00 a.m.
Legislative Update Breakfast	MGM National Harbor	9:00 a.m. - 10:00 a.m.
Capitol Hill Visits	Capitol Hill	10:30 a.m. - 12:00 p.m.
NAPO Legislative Awards Luncheon	Capitol Hill ~ Location TBA	12:00 p.m. - 1:30 p.m.
Capitol Hill Visits	Capitol Hill	1:45 p.m. - 5:00 p.m.

Organization: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ **Email:** _____

Please provide name and title for individuals as they should appear on name badge:

Attendee 1: _____

Attendee 2: _____

☐ I will be sending a check made payable to NAPO

Please mail to 317 South Patrick Street, Alexandria, Virginia 22314

☐ Please bill my credit card

If you wish to pay by credit card, please complete the following and fax to **703-684-0515**

Amount: \$ _____ Card type: ☐ Visa ☐ MC ☐ Amex ☐ Discover

Card Number: _____ Expiration Date: _____ CID Number: _____

Billing Address: _____

Name on card: _____ Signature: _____