## AFL-CIO

## **SPEECH INFORMATION FORM**

Please submit this form along with a copy of the event agenda.

Officer (select one): Rich Trum		rumka	nka Liz Shuler		Tefere Gebre			
Event Title:								
Event Location:								
Event Date: Speec		Speech	Time:	AM PM <b>Number</b>				
Organization Contac	t:		Title:					
Cell Phone:			E-mail:	E-mail:				
Backup Contact:			Title:					
Cell Phone:			E-mail:					
Length of Remarks:								
Who will introduce?								
Who else is speaking	?							
Who will he/she follo	w?							
Is there a stage?	Yes No	Podium?	Yes N	No <b>Micropho</b> n	e? Yes	No		
Short description of	speech topic.							
Is it open press?	Yes	No	W	ill there be Q&	<b>\?</b>	es	No	
Will it be photograph	ed? Yes	No	w	ill it be videota <sub>l</sub>	ped? Y	es	No	

For more information or questions please contact Tim Schlittner at TSchlittner@aflcio.org or 202-637-5294.