

# CHURCH REPORTING FORM

**Instructions to Church Coordinator:**

Please email this completed form to [newjersey@familypolicyalliance.com](mailto:newjersey@familypolicyalliance.com)

One form should be filled out per legislative district number

Your Church/Organization \_\_\_\_\_

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

NJ Legislative District Number: \_\_\_\_\_

Total letters sent: \_\_\_\_\_