



## Request for Chamber Involvement

Please submit completed form to Gary Bakke at [gary@missoulachamber.com](mailto:gary@missoulachamber.com) or Nicole Childre at [nicole@missoulachamber.com](mailto:nicole@missoulachamber.com) or fax to 406-543-6625.

Requesting Member: \_\_\_\_\_ Date: \_\_\_\_\_

What is the Issue? \_\_\_\_\_

\_\_\_\_\_

Summary of the Issue \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Timeline on the Issue \_\_\_\_\_

Supporters (groups, industries, or individuals of this issue) \_\_\_\_\_

\_\_\_\_\_

Address and Phone # \_\_\_\_\_

\_\_\_\_\_

Opposition (groups, industries, or individual of this issue) \_\_\_\_\_

\_\_\_\_\_

Address and Phone# \_\_\_\_\_

\_\_\_\_\_

## BREADTH OF INFLUENCE

The outcome of the issue depends upon what level(s) of government?

- \_\_\_\_\_ 1. Federal
- \_\_\_\_\_ 2. State
- \_\_\_\_\_ 3. County
- \_\_\_\_\_ 4. City

## ACTION REQUESTED

What position are you asking the Missoula Chamber to take on this issue?

- \_\_\_\_\_ 1. No Action
- \_\_\_\_\_ 2. Support
- \_\_\_\_\_ 3. Oppose

What specific action(s) would you like to see the Chamber take in support of your position?

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Arguments in favor of your position: \_\_\_\_\_

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Arguments Against: \_\_\_\_\_

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**DEGREE OF DIFFICULTY**

In your opinion, prevailing on this issue will require:

- \_\_\_\_\_ 1. A major allocation of Chamber resources. Requires the Chamber's money, active and primary lobbying, communication, grass roots activation, coalition building, etc.
- \_\_\_\_\_ 2. A significant allocation of resources. Requires active communication, grass roots activation and lobbying support.
- \_\_\_\_\_ 3. A moderate allocation of resources. Requires periodic communication with Chamber members.
- \_\_\_\_\_ 4. A minimal allocation of Chamber resources. One or two notices to Chamber members.

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(Chamber use only)

Request handled by: \_\_\_\_\_ Date: \_\_\_\_\_

Action taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Outcome: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Follow up: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

