

## CITY and COUNTY OF SAN FRANCISCO

2015 Combined Charities Campaign

Speaker Request Form

Charity Fair	Department Train	ing _	Presentation
Complete form and FAX to:	Michelle Clancy Local Independent Cha Fax: (415) 925-2650 Campaign Hotline: (41)		
Please try to provide at least 72 better). Additionally, pleas organization is not alw		a request for a	particular speaker or
Department:			
Captain/Coordinator:	Phone	:	
Contact Person on Site:		Phone:	
Event Day & Date:		_ Audience Size	e:
Start Time & Length of Meeting:	(i.e. 9:00 – 10:00 am):		
Max # of speakers desired:			
Length of each speaker's presenta	tion: (i.e. 30 min):		
Street Address, Floor & Room:			
Speaker check-in instructions:			
Comments:			