



NCPA
Political Advocacy Challenge
Cover Report Form

1. Name of School/College of Pharmacy:

2. Submitting NCPA Chapter Officer Name and Email Address:

Please list all Political Advocacy Challenge Events on this cover sheet and email it with your forms to the address below (you may use additional cover forms if needed)

Event Name and brief description of event	Date of Event	# of Participants	# of NCPA Members	Names of Legislators Contacted (if applicable)

Please email cover form, event forms and any supporting documents (i.e. pictures, fliers, etc.) in with your Chapter of the Year Report by May 31st 2010