

David C. Toland, Secretary

Laura Kelly, Governor

## Lt. Governor/Secretary David Toland Speaker Request Form

Please email your completed Speaker Request Form to [Leisa.Shepherd@ks.gov](mailto:Leisa.Shepherd@ks.gov)

### Event Information

Event Date: \_\_\_\_\_ Start Time: \_\_\_\_\_  AM  PM End Time: \_\_\_\_\_  AM  PM Time LG Speaks: \_\_\_\_\_

Event Type:  Indoor  Outdoor

Event Name: \_\_\_\_\_ Organization Hosting Event: \_\_\_\_\_

Event Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

Type of Presentation (ie, Keynote, Opening Remarks): \_\_\_\_\_

Length of Presentation: \_\_\_\_\_ Audience: \_\_\_\_\_ Number in Attendance: \_\_\_\_\_

Panel Presentation  Yes  No Are there other Speakers?  Yes  No If Yes, provide a list of any other speakers.

Are there other Dignitaries/Guests?  Yes  No If Yes, provide a list of any invited Dignitaries/Guests who will be in attendance.

Q&A session  Yes  No Open to the Public  Yes  No Open to the Media  Yes  No

Lectern Provided  Yes  No A/V Provided  Yes  No Microphone Provided  Yes  No

Meal Served  Yes  No Expected Media: \_\_\_\_\_

### Topic of presentation, agenda, and other additional information about your event. This will be used in evaluating your request.

### Event Location Information:

Name of Venue: \_\_\_\_\_ Room Number/ Room Name/ Room Floor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*Thank you for contacting the Kansas Department of Commerce. This information will help with scheduling, with the Lt. Governor/Secretary's attendance based on his availability. We will follow up with a separate email once his availability has been determined.*