E-mail Address: *

First Name: *

Last Name: *

Address: *

City: *

State: *

Zip: *

Home Phone: *

```
function set_checks(Bool) {      if (Bool){
document.getElementById("6").checked = true;
document.getElementById("7").checked = true;
document.getElementById("8").checked = true;
document.getElementById("9").checked = true;
document.getElementById("10").checked = true;
document.getElementById("11").checked = true;
document.getElementById("12").checked = true;
document.getElementById("13").checked = true;
document.getElementById("14").checked = true;                    }      else {
document.getElementById("6").checked = false;
document.getElementById("7").checked = false;
document.getElementById("8").checked = false;
document.getElementById("9").checked = false;
document.getElementById("10").checked = false;
document.getElementById("11").checked = false;
document.getElementById("12").checked = false;
document.getElementById("13").checked = false;
document.getElementById("14").checked = false;                    }      }
```

Check All

Areas of Interest

Education

Health Care

Immigration
Medicare
Medicare/Medicaid
Military
Social Security
Telecommunications
Veterans Affairs

By completing this form, you are authorizing us to send regular e-mail updates to your e-mail a