## **REQUEST A CalVCB PRESENTATION**

VCB-50-30004 (New 11/2022)



Our outreach specialists are available to come to your location and provide a presentation regarding the victim compensation program. We are also available for virtual presentations.

To request a presentation using our online form, click here (https://lp.constantcontactpages.com/su/aYnontu).

Requestor Information	
First Name:	Last Name:
Job Title:	Company:
	Phone Number:
CalVCB Presentation Information (select all that apply)	
Request to:	☐ Table ☐ Present (in person) ☐ Present (virtually)
	☐ Other Other (please specify)
Topic(s):	☐ CalVCB Overview ☐ How to Complete a CalVCB Application
	☐ Other Other (please specify)
Event Informat	tion.
Event Informat	tion
Description of Event:	
Time of Event:	Date of Event:
	nt:
County:	Approximate Number of Attendees:
Attendees:	□ Advocates □ Interns □ Case Workers □ Program Managers
	☐ Other Other (please specify)
Submit the CalVCB Presentation Request: Email us: Advocateinfo@victms.ca.gov	

CALIFORNIA VICTIM COMPENSATION BOARD P.O. Box 3036 • Sacramento, CA 95812 • Phone: 800-777-9229 • www.victims.ca.gov