

1) Please print out the Advocacy Letter. 2) Make copies of the page for distribution. 3) Ask each person to **COMPLETE AND SIGN ALL FOUR SECTIONS**. 4) Do not cut apart. 5) Mail all completed sheets to Suicide Prevention Action Network USA, 1025 Vermont Avenue, NW, Suite 1200, Washington, DC 20005.

## ADVANCE SUICIDE PREVENTION

**SPANUSA**<sup>®</sup> Suicide Prevention Action Network USA  
1025 Vermont Avenue, NW  
Suite 1200  
Date \_\_\_\_\_ Washington, DC 20005

Dear Senator \_\_\_\_\_

As a future voter, I petition you to please:

- 1) Direct resources to implement the **National Strategy for Suicide Prevention**, and
- 2) Provide accessible and affordable mental health services.

Thank you.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_  
These 4 digits are important

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Dear Senator \_\_\_\_\_

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1025 Vermont Avenue, NW  
Suite 1200  
Date \_\_\_\_\_ Washington, DC 20005

Dear Governor \_\_\_\_\_

As a future voter, I petition you to please:

- 1) Direct resources to implement a state suicide prevention plan, and
- 2) Provide accessible and affordable mental health services.

Thank you.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_  
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## ADVANCE SUICIDE PREVENTION

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1025 Vermont Avenue, NW  
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Date \_\_\_\_\_ Washington, DC 20005

Dear Representative \_\_\_\_\_

As a future voter, I petition you to please:

- 1) Direct resources to implement the **National Strategy for Suicide Prevention**, and
- 2) Provide accessible and affordable mental health services.

Thank you.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_  
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