

GRAND LODGE OF INDIANA

CO-OP PUBLIC AWARENESS CAMPAIGN

This form must be submitted to Grand Lodge of Indiana (Attn: Public Relations Dept.) via mail to address at lower right or to pr@indianafreemasons.org within 60 days of public relations effort completion or 60 days of invoice date. The individual lodge will be eligible to receive a maximum of \$500.00 in co-op matching funds for \$1000.00 or more spent on marketing the lodge and Freemasonry. Public relations efforts AND claims must occur prior to May 15th of the year requested to be eligible. Reimbursement will occur on a first come/first serve basis until \$10,000 co-op budget is depleted.

Lodge Name:	Today's Date:			
Contact Name:				
Contact E-mail:	Contact Phone:			
Contact Cell Phone:	Contact Fax:			
Contact Address:				
City:	State:	Zip:		
 Total Pre-Approved Campaign Costs Sub Print (Newspaper, Magazine, Direct Mai Please Include the Following Proof Pul Copy of the print material from the publ Original PAID publisher's invoice showing publication name, and cost. Direct Mail - Printer bills, mailing house B Radio - Must Include: Notarized tearsheet (radio script), provid Original PAID invoice showing the date ar Television - Must Include: Copy of VHS tape of finished public serv Notarized electronic tearsheet, provided Original PAID invoice from television stat Outdoor Billboard - Must Include: Actual item sample or photo of outdoor Original PAID invoice. Other Approved Public Awareness Effor Chip Events, Lodge Open House) - Must Photo of Signage or Beautification, Pape In case of Open House, provide written rattendance count. Original PAID invoice(s) substantiating efformation 	 I) - Must Include: blic Relations Efforts: lication, or direct mail sample. g the date the print material ran, bill and postage bill. ed by your radio station upon rend time(s) public awareness spot rice announcement. by your television station upon rend ion. billboard. t (i.e. Lodge Beautification, Sign tinclude: rwork substantiating 40+ Licens harrative of program and results fort. 	, size of print material, equest. aired, length of radio sp request. age, 40+ License Plate F se Plate Program/Chip E of effort including publ	ot, and cost. Program, vents. lic	
Lodge Master Signature:	Γ	Date:	Freemasons' Hall P.O. Box 44210	
Contact Signature:	Γ	Date:		
Approved			P. 317 634 7904 F. 317 634 1141	
Grand Lodge of Indiana:		Date:	indianafreemasons.com	