



# Cooperative Advertising Claim Form

**Do you have your invoice, copy of ad, photograph, etc.?**

<b>Date Submitted</b>	<input type="text"/>		
<b>Total Invoice Amt.</b>	<input type="text"/>	<b>Montly Invoice Amt.</b>	<input type="text"/>
<b>Account Number</b>	<input type="text"/>	<b>Company Name</b>	<input type="text"/>
<b>Contact Name</b>	<input type="text"/>	<b>Phone Number</b>	<input type="text"/>
<b>Address</b>	<input type="text"/>	<b>City, State, Zip Code</b>	<input type="text"/>
<b>Email Address</b>	<input type="text"/>		
<b>Website Address</b>	<input type="text"/>		

**Cooperative Advertising Type (please check one):**

- |             |           |             |              |             |                  |
|-------------|-----------|-------------|--------------|-------------|------------------|
| Banner/Sign | Billboard | Direct Mail | Seminar      | Newspaper   | Promotional Item |
| Radio       | TV        | Website     | Yellow pages | Other _____ |                  |

**For Jasper Engines and Transmissions Use Only**

<b>Date Processed</b>	<input type="text"/>	<b>% Paid</b>	<input type="text"/>
<b>Branch #</b>	<input type="text"/>	<b>Total Amt. Paid</b>	<input type="text"/>
<b>Co-op Year</b>	<input type="text"/>	<b>Credit Memo #</b>	<input type="text"/>

**Fax:** 812-481-0217

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Attn: Co-op Advertising  
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