

EDNEY DISTRIBUTING COMPANY, INC. CO-OP ADVERTISING CREDIT CLAIM



888.443.3639 | edneyco.com

Dealer Name _____

Phone () _____

Address _____

Account # _____

City, State, Zip _____

_____/____/____
Dealer Signature Date

NEWSPAPER/OTHER PRINT MEDIA

ENCLOSE: ☐ Copy of paid invoice ☐ Full size tear sheet for each day ad ran

PUBLICATION	DATE(S) OF AD	TOTAL COST OF AD	AMOUNT REQUESTED	PRODUCT ADVERTISED

RADIO/TELEVISION ADVERTISING

ENCLOSE: ☐ Original notarized radio script, TV spots & affidavit of performance ☐ Copy of paid invoice ☐ Dealer produced TV ads (if applicable)

MEDIA NAME	DATE(S) OF SPOTS	TOTAL COST OF SPOTS	AMOUNT REQUESTED	PRODUCT ADVERTISED

FAIRS, SHOWS, EXHIBITS

ENCLOSE: ☐ Photo of entire display ☐ Copy of space contract & invoice

NAME	SHOW DATE(S)	TOTAL SIZE OF SPACE	SPACE USED BY GRASSHOPPER	TOTAL COST OF SPACE	AMOUNT REQUESTED	PRODUCT ADVERTISED

IMPORTANT REMINDERS

- Enclose the proper documentation
- Claims must be received within sixty (60) days of invoice date or claim may be denied and returned
- Any variations from standard guidelines require prior approval
- Co-op credit is based on available funds
- Staple all documentation to Co-op Advertising Credit Claim Form

SUBMIT CLAIMS TO:

EDNEY DISTRIBUTING COMPANY, INC.
ATTN: CO-OP ADVERTISING
P.O. BOX 1236
LAKEVILLE, MN 55044