

CO-OP REQUEST FORM

Presenter - Sales Rep/Distributor information *Reimbursement (if any) will go to this company*

Company name		Contact name	
Address		City/State/Zip	
Contact phone		Event Date	

Organization Receiving Presentation

Company name		Contact name	
Address		City/State/Zip	
Contact phone		Event Date	

Event Details: _____ % Total Door product promoted during event

AIA Box Lunch Presentation

Product Box Lunch Presentation

Trade Show

Event Name	Total Cost	Amount Requested <i>Per Co-Op Overview</i>

Comments (include benefits to Total Door)

Process

- Total Door Systems will cover 50% of the cost per our Co-Op Overview.
- All Trade Show Co-Ops must be pre-approved.
- All requests must have a copy of the original receipt from the vendor, no exceptions.
- Request form and receipt must be sent in no later than 7 days after event date.

Approval by TD: _____

Denied by TD: _____

Candace Kitchen candace@totaldoor.com 248-623-6899 x116