



WEST COVINA FILIPINO LIONS SOUVENIR PROGRAM ADVERTISEMENT

To Whom It May Concern,

I am writing this letter on behalf of West Covina Filipino Lions Club (WCFLC), to invite you to advertise in our Souvenir Program commemorating our Inaugural Charter Night on October 22, 2011 at West Covina Bowling Lanes.

Advertising costs are as follows:

\$25 – ¼ page

\$50 – ½ Page

\$100 – Full Page

\$150 – Inside Back Cover

\$200 – Outside Back Cover

Proceeds of advertising donations will be used for the various WCFLC activities. Our Club's slogan as "We Believe, We Serve," means we are optimistic that working together we will be able to reach out to our less fortunate brothers and sisters.

If you wish to afford us with our request, please send your camera-ready advertisement document, together with your payment to our Club Treasurer, Nenita Martinez, PO Box 552, West Covina, CA 91793. These need to be received by **October 14, 2011**.

Thank you so much, and we hope to see you in our Inaugural Charter Night.

Cordially,

Noel Wychico
President

Advertiser name: _____
Advertisement size: _____
Enclosed is the full payment in the amount of _____. Check # _____
Advertiser's Address _____
Phone _____ Fax _____ Email _____



WEST COVINA FILIPINO LIONS CLUB

P.O. Box 552, West Covina, CA 91793, USA
Tel. No. 626-665-5107

ADVERTISEMENT CONTRACT

ADVERTISING RATE

Back Cover.....	\$200.00
Inside Back Cover.....	150.00
Full Page.....	100.00
Half Page.....	50.00
Quarter Page.....	25.00
Printed in Offset	

This is to authorize the publication of _____ page of advertisement in the
West Covina Filipino Lions Club (WCFLC) "Inaugural Charter Night"
2011 Souvenir Program in the amount of _____ (\$_____).
Payment of this advertisement, if not made in advance, must deposit 50% and the
balance will be made immediately upon presentation of bill together with the proofs of
publication.

Solicited by: _____

Advertiser _____

Date _____

Address _____

Signature _____

OFFICIAL RECEIPT

_____, 20____

Received from _____
of _____
the amount of _____ (\$_____)
as advance payment (donation) for _____ page of advertisement in the
West Covina Filipino Lions Club "Inaugural Charter Night" Souvenir Program .

Authorized representative

Make Check Payable To: **West Covina Filipino Lions Club**
P.O. Box 552
West Covina, CA 91793
Tel. Phone: (626) 665-5107

Amount \$ _____
Advance payment... \$ _____
Balance..... \$ _____