



*Art's-Way Manufacturing Co., Inc.
5556 Highway 9; PO Box 288
Armstrong, IA 50514-0288*

Coop Advertising Credit Request

Dealer Name: _____ Dealer Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Media Information:

Ad Type: Newspaper Tabloid Magazine
 Catalog Radio Other _____

Participation:

1. Cost of Total Ad Unit \$ _____

2. Amount of Participation Requested \$ _____

(50% of line 1)

NOTE: Please be sure to attach ad copy, tear sheet or script
and a copy of the media invoice for the total ad.

Requested By: _____ Date: _____

Approved By: _____ Date: _____

Additional Information: _____

