Lisa Adelle Custom Marketing Program			
214.969.0141			
Request Form			
Reserve your area now to insure yours will are advised otherwise. Completed orders m season, additional time required. Call for sc	oust be recieved 60 o		
Reserve my Target Market Zoneand to prior reservation. You will be notified immediately			t
Approximate the number of Custom Catalogues you	Estimate	ed In-Home	
plan to print:	Date:		
Plazas			
Pleaseindicate			
the zip			
codes			
you wish to			
reserve:			
Please call me to discuss a custom	catalogue for my s	store.	
Please send me a custom catalogue	sample package	that represents the	
vendors that are most important to	me.*		
Please call me to discuss additional	marketing mater	ials: signage direct	
mail, newsprint, magazine and/or V		ais. signage, unect	
	_		
Store	_ Web		
Name:	Address:		
Street			
Address/P.O.Box:			
City	State	Zinu	
City:		Zip:	
Contact	Email:	Fax:	
Person :		FdX;	
B	est Time To		
	all (CST): –		_
*Remember to include your Vendor List	ing page with the fa	ax reply so we may provide	e you with a sample package of the
		pages that are most impo	
Fax To: 214.871.9431			