

## Flyer Distribution Request

Name of Organization:		
Address:		
Phone Number:	Contact Person:	
Purpose of Flyer:		
Signature:		
Please attach a samı	ple of the flyer you wis	h to have distributed.
All materials distrib The Chehalis School District does	uted must contain the not sponsor this event and the ge to distribute materials, the tilled in any court or administrations.	following statement: District assumes no responsibility Chehalis School District shall be held tive tribunal arising out of the
The District would also request that will be responsible for the copies be following student counts for each state.	being counted out for each indi	h AND in Spanish. The organization vidual school.Please note the
9-10-11-12 (WFW) = 50 for cour	nter or posters 3-4-5 (OSE)	= 27 sets of 30 pre 3 hole punched
6-7-8 (CMS)= 50 for counter or j	posters PK-K-1-2 (	JLE)= 31 sets of 24 and 1 set of 20
Each buildi	ing should receive 30 copies i	n Spanish
Distribute to: PK-K-1-2 3 4-5	Distribution Requested:	□Post □Send Home □Counter
Distribute to: 6-7-8 9-10-11-12	Distribution Requested	□Post □Counter □Email
		ote schools. While we are approving
Signature:	Date	·
Distribute to: PK-K-1-2 3 4-5	Distribution Requested: □Po	st □Send Home □Counter
Distribute to: 6-7-8 9-10-11-12	Distribution Requested: □Po	st □Counter □Email
Rick Goble Superintendent	Trisha Smith Assistant Superintendent	Heather C. Pinkerton Chief Financial Officer

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