

Flyer Distribution Request

Name of Organization:		
Address:		
	Contact Person:	
Purpose of Flyer:		
Signature:	Date:	
All materials dis "The Chehalis School District of for it. In consideration of the pr	tributed must contain loes not sponsor this event al rivilege to distribute materials tion filed in any court or admi	u wish to have distributed. In the following statement: Ind the District assumes no responsibility In the Chehalis School District shall be held Inistrative tribunal arising out of the Per and judgments or awards."
Distribute to: PK-K-1-2 3 4	-5 Distribution Reques	sted: □Post □Send Home □Counter
Distribute to: 6-7-8 9-10-11-1	2 Distribution Reques	sted: □Post □Counter □Email
following student counts for each 9-10-11-12 (WFW) = 50 for cor 6-7-8 (CMS)= 50 for counter or	unter or posters 3-4-5 (OS	SE)= 27 sets of 30 pre 3 hole punched 2 (JLE)= 31 sets of 24 and 1 set of 20
Each buil	ding should receive 30 copie	es in Spanish
		e note schools. While we are approving
Signature:	D	ate:
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
Dr. Christine Moloney Superintendent	Trisha Smith Assistant Superintendent	Heather C. Pinkerton Director of Business and Operations
310 SW 16 th St Chehalis, WA	98532 T 360 807 7200 F 360	0 748 8899 www.chehalisschools.org