

LAMAR Advertising
Application for Public Service Space

Organization _____
Person Requesting Space _____ Title _____
Address _____
City _____ State _____ Zip _____
Phone Number _____ IRS Tax Exempt # _____

PLEASE RESPOND TO EACH QUESTION OR REQUIREMENT BELOW

1. Number of public service displays requested: _____
2. List three approximate target dates that you would prefer to have your advertising displayed:
1. _____ 2. _____ 3. _____
(PLEASE NOTE: The wider the selection of dates, the better we have a chance to accommodate your request)
3. Circle any target geographic areas in which you would prefer the advertising to be displayed:
North South East West Downtown
(Public service is awarded solely on a space available basis)
4. Do you have a professional artist or advertising agency designing your artwork? Yes ___ No ___
(Please attach a rough draft of your artwork to this form, designate colors of your design idea)
5. Provide background (on a separate sheet) and descriptive information about your organization and attach any printed materials that you may have available. If you requested public service displays are for promotion of a special event, please provide details below:
Date of event _____ Sponsors _____
Participants _____
Please confirm that all of the participants are Non-Commercial and Non-Profit. Yes_ No ___
6. Is your organization charitable in nature or purpose? Yes ___ No ___
If so, who is the principal beneficiary? _____
List your organization's principal activities: _____

7. Is your organization registered with the state as a charitable organization? Yes ___ No ___
State _____
8. Is your organization incorporated? Yes ___ No ___ State _____
9. Confirm that your organization is non-profit? Yes ___ No ___
10. Does your organization have an Internal Revenue Service (IRS) tax exempt certificate or letter?
Yes ___ No ___ (Please attach copy of certificate or letter)
11. Please designate the type of organization: (Check only one)

<input type="checkbox"/> Environmental	<input type="checkbox"/> Cultural
<input type="checkbox"/> Neighborhood Group	<input type="checkbox"/> Educational
<input type="checkbox"/> Community	<input type="checkbox"/> Religious- non-denominational
<input type="checkbox"/> Drug and Alcohol	<input type="checkbox"/> AIDS
<input type="checkbox"/> Historic Preservation	<input type="checkbox"/> Art Organization
<input type="checkbox"/> Local Government	<input type="checkbox"/> State Government
<input type="checkbox"/> Federal Government	<input type="checkbox"/> Social Services
<input type="checkbox"/> Fraternal	<input type="checkbox"/> Other

12. Attach a complete mailing list (home or office other than applicant organization) of your Board of Directors. (This information is confidential to the public service department)
13. Indicate other media by name that you are using or plan to use for your public service message and your contact at each media:
 Radio _____
 Magazine _____
 TV _____
 Newspaper _____
 Other (please specify) _____
14. I hereby verify by my signature on this form that the applicant organization has not expended and does not plan to expend funds in this calendar year (other than production costs) for advertising time or space in any of the media listed above.
 _____ Date _____

Verification:

PLEASE INITIAL NEXT TO EACH STATEMENT:

_____ I will furnish advertising material at least 15 days prior to the scheduled display date.

_____ I understand that all public service displays must include the **LAMAR** public service logo.

_____ I have closely reviewed the requirements set fourth in this handout and verify that the applicant organization is eligible to receive a donation of public service space and agree to pay any applicable charges for the production. Production : Paper: \$125 per unit. \$70 posting fee. Vinyl \$1000, \$250 posting fee. Bench ads \$50 each. Shelter ads \$100 each.

Signed _____ Title _____ Date _____
 (Before mailing please make a copy for you records.)