ACTV Channel 10
COMMUNITY BULLETIN BOARD

RETURN THIS FORM TO: AURORA COMMUNITY TELEVISION
5 East Downer Place Suite T
Aurora, IL 60506
Tel (630) 844-1826
Fax (630) 801-5124

NAME _____
ORGANIZATION_____
ADDRESS _____
TELEPHONE (DAYS)_____ (EVENINGS) _____

NUMBER OF WEEKS TO RUN MESSAGE 1 2 3 4

DATE TO BEGIN _____ DATE TO END _____

PLEASE NOTE: ALL messages must be received at least one week prior to the scheduled air date. ACTV assumes no responsibility for the accuracy of the copy received. If you wish to renew the message after four weeks you must submit a new form. ACTV will not air any political, personal, commercial or any information used for profit or sales.

INSTRUCTIONS: Use one space for each letter, number or space between words. Each item of punctuation also requires a space. Do not exceed the space available on the grid. You may submit two forms to cover the entire message.

PLEASE PROOF READ YOUR MESSAGE!

(FOR OFFICE USE ONLY)

DATE ON _____ DATE OFF _____

PAGE _____ INITIALS _____