

LACOMBE DIRECTORY

PREMIUM LISTING



Company Name: _____

Contact Name(s): _____

Address: _____

Town / City: _____

Postal Code: _____

Phone # Daytime/Office: _____

Mobile Phone #: _____

Fax #: _____

Web Site Address: http://www. _____

E-mail address: _____

Desired message and info on ad, up to approx. 50 words: (we will add the address, ph #, E-mail & website link)

If you want to supply the photo for your listing please E-mail to: merv@uppgroup.com

Amount Due: \$250.00; *Special offer: \$450.00 for Listings on all of our Directories.
Credit Card Type: Visa, MasterCard:
Card # _____ Expires: _____ / _____
Name on card: _____
If paying with credit card please fax completed order to 1-800-935-6913.

If paying by cheque please make payable to Uppgroup Inc. and mail to:
#4 Kayton Estates, Sylvan Lake, AB, T4S 1R7