

Act! Co-Op Claim Form

**Instructions:**

1. Complete all sections of the Reimbursement Claim form within 90 days of the activity date.
2. Attach copies of activity documentation at time of claim submission.
3. Attach all invoices and proof-of-payment.
4. Email or fax completed form to [**actcoop@swiftpage.com**](mailto:actcoop@swiftpage.com) **or**  (480) 323-2465

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| --- | --- | --- | --- | --- |
| Date: |  | Account #: | | |
| Company name: |  | Telephone: |  |  |
| Address: |  | Fax#: |  |  |
| City: |  | State: |  | Zip: |
| Partner name: |  | Email address: |  |  |

**Activity:**

Advertisement (copy of ad & rate card)

Boot camp (registration invoice)

Business Cards (business card & rate card)

Business/Trade Associations (association name)

Direct Mail (copy of mailer)

Directory listing (copy of listing)

Electronic Direct Mail/Newsletter (email template)

First Research (none)

List Procurement (description of marketing activity)

Literature (copy of literature)

Insights Registration Fee (none)

Newsletters (copy of newsletter)

D Online cost-per- click Listings (copy of listing)

Online lead generation subscriptions (copy of listing/ad)

Promotional Items (photo or sample of item with Sage logo)

Search Engine Optimization (web link, copy landing page)

Seminar/Client Conference (copy of invitation)

Sponsorships (sponsorship date, activity)

Success Story (copy of success story)

Telemarketing (copy of script, call/ list, logistics, hours)

Trade Association Fees (name of trade association)

Trade Show Booth Purchase (none- if purchased through Sage

vendor)

Trade Show Booth Graphics (copy of graphic)

Trade Show Booth Rental (none- if purchased through Sage

vendor)

Trade Show (copy of show documentation/application)

Yellow Page Advertising (copy of ad)

Web Banners Advertisements (copy of landing page)

Webcast (copy of invitation/agenda)

Website Design (copy of website or link to website

showing Sage products)

Other (Please Specify):

**Targeted Audience (select both if applicable): Reimbursement Detail·**

New Prospects  Current Customers

**Reimbursement Detail·**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description | Date | Net Cost | X %  of Reimbursement | Claimed Amount |
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Note: Sales tax and shipping charges are not eligible for reimbursement.