



## VILLAGE MARKET

# Request Form for Weekly Ad Flyer

Date: \_\_\_\_\_ **(NO PO Boxes – Physical Address Only!!)**

Customer Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt.# \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

I usually receive flyer(s) for \_\_\_\_\_  
(store name/location)

In what paper do you usually receive our flyer? \_\_\_\_\_

Which flyer did you miss?  
(store name, location, week of sale)

Missed this week's flyer? Yes  No

Missed flyer occasionally? Yes  No

Did you receive the newspaper but not our flyer? Yes  No

Never received our flyer, but would like to Yes  No

Comments: \_\_\_\_\_

**Thank you for Shopping at Village Market Food Centers!**

*\*Note to Store: Please fax ASAP to #867-3444, Attention: Marketing Department.*

Store# \_\_\_\_\_ Contact Person \_\_\_\_\_