



Please fill out the following and include an approval signature. The form needs to be returned to:

Abby Cloud
MISD Communications Department
605 E. Broad St., Mansfield, TX 76063
Fax: 817.473.5370

Company/Organization: _____

Description of Special Offer:

Expiration Date (*all offers should last at least one month*): _____

Is this offer an update to an existing Perks offer? Yes _____ No _____

Is this offered only to MISD? _____

Phone, e-mail, and/or Web site _____

Address (To receive Perks decal) _____

Approved By _____ Date _____