

**Tobacco Prevention and Cessation Program  
SOS Collateral Material Request Form**

NOTE: Request for collateral material must be received at least three weeks before the event. Due to budgetary restraints, SOS cannot provide for all your promotional needs. Please consider other sources for collateral materials.

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Date and Location: \_\_\_\_\_

\_\_\_\_\_

What Counties Will Your Event Service? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will the Event Be Advertised? \_\_\_\_\_

Request Specific Collateral Item: \_\_\_\_\_

\_\_\_\_\_

Return to: Glenn B. Sergeant, Sr.  
P.O. Box 1437, Slot H3  
Little Rock, AR 72203  
Phone: (501) 661-2953 Fax: (501) 280-4040