



26<sup>th</sup> Annual

# John A. Holbrook Awards Dinner AD BOOKLET ORDER FORM



### AD SIZE:

- Full Page Premier Placement ....\$250.00  
*Includes Table Sponsorship Sign*
- Full Page 6.5”H x 4.5”W .....\$200.00
- Half Page 3.25”H x 4.5”W.....\$100.00
- Quarter Page 3.25”H x 2.25”W.....\$50.00
- Congratulatory Message *Text Only*.\$50.00  
*Sizes are approximations, ads may be slightly enlarged or reduced to fit publication*

### AD COPY:

Attach your ad copy, original ad or business card to this form. If you would like to submit your ad copy via email (preferred); please send as a pdf. attachment to [hruppenicker@westbrookrepublicans.org](mailto:hruppenicker@westbrookrepublicans.org) and return this form with payment only. Please put Holbrook Dinner Ad Book in subject line .

Please note: Low-resolution images will appear noticeable grainy or blurry when reproduced.

Please call with questions regarding ad format, etc (860)391-5166 (Harry)

## HONORING

**STATE REP. DEVIN CARNEY**  
**TINA DATTILO**  
**WESTBROOK FIRE DEPARTMENT**

### ADVERTISER INFORMATION:

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Credit Sale to (Member’s Name): \_\_\_\_\_

### SPECIAL INSTRUCTIONS:

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### PAYMENT:

**Order and Pay Online at**

<https://secure.anedot.com/westbrookrtc/events/2026hdads>

**Or by Check**

*Please make checks payable to: WRTC*



Enclose this form and mail  
with your payment to:  
PO Box 1125  
Westbrook, CT 06498

**Please complete form on reverse side** →

*Deadline May 1, 2026*

*Event May 14, 2026*

Thank You For Supporting the Westbrook Republican Town Committee  
Richard Kuehlewind, Treasurer

**Sample Certification - Form E**

Form E - For use by:

*Town Committees for fundraiser advertising  
(Ad Book and Sign Purchases)*

Sample Certification - Form E  
Revised January 2012

**Advertising Purchase Certification Form**  
*Westbrook Republican Town Committee*

Town Committees may not receive advertising purchases from communicator lobbyists, immediate family members of communicator lobbyists, state contractors, prospective state contractors, or principals of state contractor or prospective state contractors.

NAME OF PURCHASER				DATE OF FUNDRAISER (mm/dd/yyyy)	
				May 14, 2026	
Cash		Money Order	Check #	Debit Card/Credit Card	
AMOUNT OF SIGN PURCHASE		AMOUNT OF PROGRAM AD PURCHASE		AMOUNT OF AGGREGATE ADVERTISING PURCHASES THIS CALENDAR YEAR (If known)	
\$		\$		\$	
Is the purchaser a Business Entity?	YES	NO	Is purchase being made from the account of a Sole Proprietorship?	YES	NO
	If yes, NAME OF BUSINESS or NAME OF SOLE PROPRIETORSHIP				

Please answer each of the following on behalf of the purchaser:

Yes No Are you a communicator lobbyist?

Yes No If you are an individual, are you the spouse or dependent child of a communicator lobbyist?

Yes No If you are an individual, are you a principal of a state contractor or prospective state contractor?

Yes No If you are a business entity, are you a state contractor or prospective state contractor?

**CERTIFICATION**

I hereby certify and state that all of the information disclosed by me and set forth above on this form is true and accurate to the best of my knowledge and belief.

\_\_\_\_\_  
SIGNATURE OF PURCHASER/PURCHASER'S AGENT

\_\_\_\_\_  
DATE (mm/dd/yyyy)

\* If you are an individual you may enter an alternate address in lieu of your residential address only if you are admitted into the Address Confidentiality Program pursuant to General Statutes § 54-240(a) or if you are one of the individuals with protected address status articulated in General Statutes §1-217.