

Outreach Event

Informational Materials & Promotional Items Request

*PLEASE NOTE - CONTACT INFORMATION AT BOTTOM HAS CHANGED.

REQUESTING AGENCY:		
CONTACT NAME:	CONTACT'S PHONE:	
ADDRESS:		
DESCRIBE OUTREACH EVEN	T and include estimate of event attendance:	
DATE OF EVENT:	*ITEMS "NEEDED BY" DATE:	
	dees Should Place Orders 6 TO 8 WEEKS IN ADVANCE.	
LOCATION OF EVENT:		
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PLEASE NOTE MAXIMUM QUANTITIES IN AFFECT - LIMIT OF 200 PER ITEM

	M QUANTITIES IN AFFECT - LIMIT OF 200 PER ITEM.		
		QUANTITY	QUANTITY
ITEM NAME	ITEM DESCRIPTION	REQUESTED	APPROVED
Informational Insert	WVCHIP Information Summary-Business Envelope		
Information Flyer	Basic WVCHIP Information		
Prevention Brochure	Explains Preventive Services WVCHIP		
Income Guidelines Flyer	Current Income Guidelines & Copay Information		
Health Check Flyers	Flyers Available to help focus on Specific		
Healthy Checkup Flyer	Well-Child Check Ups		
Dental Flyer	Dental Check Ups		
Vision Flyer	Vision Check Ups		
Hearing Flyer	Hearing Check Ups		
Items Available Online			
Available Online	Summary Plan Description (SPD); Dental Provider		
Items that can be accessed online	Guide; and other information.		
(www.chip.wv.gov/resources):			

RETURN FORM TO:
ATTN: WVCHIP OUTREACH DEPARTMENT

270 Jack Burlingame Drive, Millwood, WV 25262-8576 (304-273-5131 Fax) (wychipoutreach@datashoppe.com)
HELPLINE (Toll-Free) 1-877-982-2447

Date Shipped: