## **Private Literature Distribution System Form 2023** Title of brochure or poster: Name of Operation: Name of Owner/Manager: Summer Mailing Address: Postal Code Winter Mailing Address: \_\_\_\_\_Postal Code Telephone: (summer) (winter) Fax: (summer) (winter) Dates of operation: From: \_\_\_\_\_\_To: \_\_\_\_\_ Day / Month / Year Day / Month / Year Please indicate the VIC locations you would like to have your literature distributed: Borden-Carleton\_\_\_\_\_ St. Peters Cavendish \_\_\_\_\_ Summerside\_\_\_\_\_ Charlottetown\_\_\_\_ West Prince \_\_\_\_ Souris \_\_\_\_\_ Wood Islands \_\_\_\_ Date Name of Owner/Manager For office use only Shelf #\_\_\_\_\_Operator # \_\_\_\_\_ Description of literature Record of Re-supply: Date: \_\_\_\_\_ Date: Notes: Name of PLDS clerk