



CERTIFIED DIAMOND DEALER CO-OP REQUEST FORM

CDD Shop Name: _____ CDD Contact: _____

CDD Phone: _____ CDD e-mail: _____

CDD Address: _____

Authorized Distributor Name & Contact Name: _____

- Type of expense:
- Store Improvement
 - Website Improvement
 - New Shop Opening
 - Advertising
 - In-Store Event
 - Signage
 - Other _____

Detailed description of Co-Op expense: _____

Anticipated Program Costs: \$

Paid by Distributor/Upper Deck (50%): \$
Paid by Certified Diamond Dealer (50%): \$

Please forward your request and estimates to your Upper Deck Authorized Distributor for approval. All co-op requests must be approved in advance by Upper Deck through the distributor. Accounts are required to provide documentation showing before and after imagery in the event of store improvements. Upper Deck signage, logos, etc. must be used in any and all advertising initiatives. Please keep your Upper Deck Authorized Distributor up to date with how the project is progressing. Since this is co-op funding, CDDs must spend the equal amount to what UD is funding. Approved credit amount will be issued as a credit to your distributor on a quarterly basis (the end of the month following the end of the quarter) if all documentation is received by the 15th of the month.