



# NTIRETY MDF REQUEST FORM

SUBMISSION DATE: \_\_\_\_\_

PARTNER NAME:	CONTACT PERSON:
EMAIL:	PHONE:
ADDRESS:	
REGIONAL CHANNEL MANAGER:	

## EVENT/ACTIVITY REQUEST DETAILS

EVENT OR ACTIVITY DESCRIPTION:	EVENT/ACTIVITY DATE: <i>(MDF REQUEST MUST BE SUBMITTED AT LEAST 60 DAYS PRIOR):</i>
BREAKDOWN OF COSTS:	
MARKETING PLAN DETAILS (HOW NTIRETY WILL BE MARKETED, TARGET AUDIENCE, ETC.):	
ESTIMATED NUMBER OF LEADS AND ATTENDEE LIST DETAILS:	
ARE OTHER TECHNOLOGY PARTNERS PARTICIPATING? Y/N IF YES, WHO AND WHAT IS THE COST BREAKDOWN:	

**MDF REVIEW PROCESS:**

Upon receipt of the MDF request, the RCM will submit the MDF request form and the Partner’s business plan to Ntirety stakeholders for approval.

**MDF CLAIM SUBMISSION:**

Once the activity is completed, submit the MDF claim to ap@ntirety.com, copying the Ntirety RCM and National Channel Marketing Manager. Claims must be submitted within seven days of the event/activity and must not exceed the previously approved amount.

Include the following:

- » Invoice
- » Proof of Performance (Attendance Reports, Photos, etc.)
- » Lead List

By submitting this form, the partner acknowledges adherence to Ntirety’s MDF guidelines and agrees to comply with the terms and conditions outlined herein.

**PARTNER SIGNATURE:**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**INTERNAL USE**

**NTIRETY APPROVALS:**

- » National Channel Marketing Manager approved  Y  N DATE: \_\_\_\_\_
- » Vice President of Sales approved  Y  N DATE: \_\_\_\_\_
- » Chief Revenue Officer (CRO) approved  Y  N DATE: \_\_\_\_\_
- » Chief Financial Officer (CFO) approved  Y  N DATE: \_\_\_\_\_