



**Chamber & Affiliate Marketing Agreement**  
*Covered California's Small Business Health Options Program*

**Commitment**

- Promote and Market Covered California's SHOP to your membership for eight weeks ending December 31,2014
- Marketing via: Organization website banner, social media (Facebook, Twitter, LinkedIn), and newsletters (email distribution to membership)
- Send CHCC copies of marketing efforts

The California Hispanic Chambers of Commerce (CHCC)/Covered California Program Grant will provide you with \$250.00 for every week you market Covered California's SHOP program to your membership. Please invoice Program Manager Waynee Lucero at [wlucero@cahcc.com](mailto:wlucero@cahcc.com) for every week your organization has advertised to your membership and include copies of the advertisements (for example: screen shots).

Organization Name: \_\_\_\_\_

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

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

This is your written commitment confirming your intent to participate in the CHCC/Covered California Grant Program Marketing Opportunity by promoting and marketing Covered California's SHOP via your organization website, social media, and/or newsletter. The CHCC agrees to pay at maximum \$250.00 for every week of advertising when proof of marketing is submitted with invoice (may be prorated).

Check all that apply:     Newsletter                       Website Banner

Social Media:     Facebook     Twitter             LinkedIn     Other \_\_\_\_\_

Organization Signature \_\_\_\_\_

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

CHCC Signature: \_\_\_\_\_

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_