

2012



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Magazine Insertion Order Form

ADVERTISER INFORMATION

Company _____
Address _____
City _____
State/Province _____ Zip/Postal Code _____
Country _____
Phone Number _____
Fax Number _____
Contact Name _____
Bill to Attn: _____

AGENCY OF RECORD INFORMATION

Company _____
Address _____
City _____
State/Province _____ Zip/Postal Code _____
Country _____
Phone Number _____
Fax Number _____
Contact Name _____
Agency Code _____
Office Hours _____

PURCHASE INFORMATION

2012 Issues: Issue #36 Issue #37 Issue #38 Issue #39 Issue #40 Issue #41
 Issue #42 Issue #43 Issue #44 Issue #45 Issue #46 Issue #47

Ad Size: Spread 1/2 Page **Premiums:** 15 Second commercial 30 Second commercial
 Full Page 1/3 Page **Commercial Code** _____

Discount: 3x 6x 9x 12x **Sales Rep** _____

Ad Rate* _____ **Artwork:** Will be sent by _____

FOR ADVERTISER Date Submitted _____
Signature _____
Title _____

FOR PUBLISHER Date Submitted _____
Signature _____

This order will constitute a contractual agreement when signed by both parties and the advertiser is bound by all terms and conditions (document attached).
Billing will follow immediately and all payments are due 14 days from the on-sale dates.

Title _____