

## Advertising Contract for Fall Creek

Please mark ad size you are requesting to be placed into the Fall Creek Newsletter.

<b>**SF25 Ad Placement Fee / Each Ad Change: \$25.00</b>			
<b>X</b>	<b>Item No.</b>	<b>Ad Type / Size (WxH)</b>	<b>Unit Price (Per issue)</b>
	FC1	Business Card / 3.75" x 2"	\$114.00
	FC2	1/4 Page / 3.75" x 5"	\$210.00
	FC3	1/2 Page / 7.75" x 5"	\$420.00
	FC4	Loose Insert (Customer Supplied) / 8.5" x 11"	\$720.00
		<b>Pamela Printing Inserts</b>	
	PP1	Loose Insert / 8.5" x 11" / Black 1-Side	\$826.00
	PP2	Loose Insert / 8.5" x 11" / Black 2-Side	\$920.00
	PP3	Loose Insert / 8.5" x 11" / Full Color 1-Side	\$1,176.00
	PP4	Loose Insert / 8.5" x 11" / Full Color 2-Side	\$1,295.00

\_\_\_\_\_ Number of Months

Please mark all months that ad will appear.

WINTER (JAN)	SPRING (APR)	SUMMER (JUL)	FALL (OCT)
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We accept payment for up to 12 months for ad space

**All ads must be submitted by the 10th of the month.**

Please send artwork to [lane@pamelaprinting.com](mailto:lane@pamelaprinting.com)

Fax - 281.240.1312

Make checks payable to **Pamela Printing Co.**

We accept all major credit cards

*\*Ad Placement form must be included with payment\**

Ad Placement/Change Fee **\$25.00**

Monthly Ad \_\_\_\_\_

Ad Layout/Design (min. \$40) \_\_\_\_\_

**Total** \_\_\_\_\_



Advertising Contract for The Leaves of Fall Creek Newsletter

Placement Form - Please fill out completely.

Date:\_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City:\_\_\_\_\_ State:\_\_\_\_ Zip:\_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Size of Ad: (Bus Card)    (1/4 Page)    (1/2 Page)

Price:            (\$114.00)    (\$210.00)    (\$420.00)

Run time: Winter (Jan)    Spring (Apr)    Summer (Jul)    Fall (Oct)

Inserts: Loose - Customer Supplied: \$720.00

Loose - PPC produced: \$826.00 (Black 1-side)  
   \$920.00 (Black 2-side)  
   \$1,176.00 (Color 1-side)  
   \$1,295.00 (Color 2-side)

Method of Payment:    ☐ Check        ☐ Credit Card

Name on Card: \_\_\_\_\_

Card No: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV:\_\_\_\_\_

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

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

Notes:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ad Placement/  
Change Fee **\$25.00**

Monthly Ad \_\_\_\_\_

Ad Layout/Design \_\_\_\_\_

Total \_\_\_\_\_