

## Advertising Contract for Greatwood Newsletter

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

Ad Placement Fee / Each Ad Change: \$25.00					
X	Ad Type / Size (WxH)	1 Month	3 Months Unit Price (Per issue)	6 Months Unit Price (Per issue)	12 Months (+) Unit Price (Per issue)
	Business Card / 3.75" x 2"	\$200.00	\$180.00	\$170.00	\$160.00
	1/4 Page / 3.75" x 5"	\$375.00	\$340.00	\$320.00	\$305.00
	1/2 Page / 7.75" x 5"	\$660.00	\$595.00	\$565.00	\$530.00
	Full Page / 7.75" x 10.25"	\$1165.00	\$1045.00	\$990.00	\$930.00
	Customer Supplied Insert 8.5" x 11"	\$1190.00			
Pamela Printing Inserts					
	PP1	Loose Insert / 8.5" x 11" / Full Color 1-Side			\$1720.00
	PP2	Loose Insert / 8.5" x 11" / Full Color 2-Side			\$1930.00

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

Please mark all months that ad will appear.

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
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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 prior to the month that the ad will be running in.**

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

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	<b>\$25.00</b>
Monthly Ad	_____
Ad Layout/Design (min. \$65)	_____
(Business Card - \$65 / Quarter Page - \$100 Half Page - \$145 / Full Page - \$185)	
<b>Total</b>	_____

**Advertising Contract for Greatwood Great News**  
**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) (Full Page)

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

Run time: (Jan) (Feb) (Mar) (Apr) (May) (Jun) (Jul) (Aug) (Sep) (Oct) (Nov) (Dec)

Inserts: Loose - Customer Supplied: \$1190.00

Loose - PPC produced: \$1720.00 (Color 1-side)  
\$1930.00 (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	<b>\$25.00</b>
Monthly Ad	_____
Ad Layout/Design	_____
<small>(Business Card - \$65 / Qt. Page - \$100 Half Page - \$145 / Full Page - \$185)</small>	
Total	_____