DISPLAY AD ORDER FORM

DATE _____ REP. _____

COMPANY _____

NAME _____

ADDRESS _____

CITY _____ PROV. ____ CODE _____

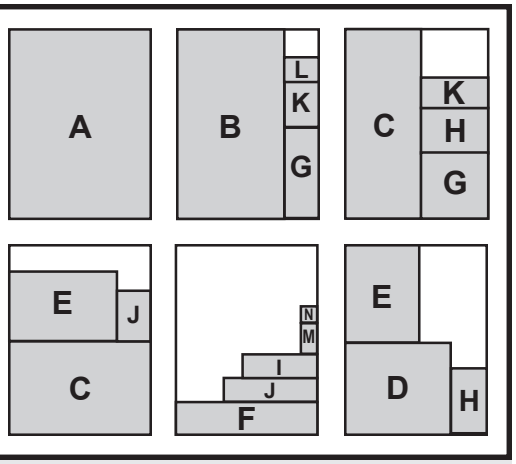
PHONE _____

CELL _____ FAX _____

EMAIL _____

WEBSITE _____

A - Full Page
B - 2/3 Page
C - 1/2 Page
D - 1/3 Page
E - 1/4 Page
F - 1/5 Page
G - 1/6 Page
H - 1/8 Page
I - 1/10 Page
J - Double Business Card
K - Extended Business Card
L - Business Card
M - Double Dash Ad
N - Dash Ad



1 col.=1 9/16" 2 cols.=3 5/16" 3 cols.=5 1/16" 4 cols.=6 3/4" 5 cols.=8 1/2" 6 cols.=10 1/4"

Production _____ **Proof** ❍Yes ❍No

INSERTION DATE/S:	$
SIZE OF AD: **COLS.** x **INCHES** AD LETTER:	$
POSTER DELIVERY / INSERT	$
WEB-SITE AD: Ad Type: COMBO RATE (-50%)	$
COLOR: ❍Yes ❍No	$
BASE PRICE	$
LESS FREQUENCY DISCOUNT	$ ( )
SUB-TOTAL	$
G.S.T.	$
BALANCE DUE	**$**

PAYMENT METHOD: ❍Cash ❍Cheque ❍Visa ❍MasterCard

Name on Card _____ Exp. Date _____

Number _____

Authorized by: _____

(Signature)