PRINT ADVERTISING INSERTION ORDER

RECNRDER

ADVERTISER INFORMATION

C NI

Deadline for submissions: March 31, 2019

Company Name:		
Contact Name:	Phone Number:	
Email:	Billing Address:	
City:	Province/State:	Postal Code/ Zip:
·		

AGENCY INFORMATION (if applicable)

Company Name:				
Contact Name:	Phone Number:			
Email:	Billing Address:			
City:	Province/State:	– Postal Code/Zip:		

1. Select ad size and applicable rate.

AD SIZE	RATE			
Fly leaf / wrapper Outside back cover Inside front cover Inside back cover Double page spread Double 1/2 page spread Full page 2/3 page 1/2 page horizontal Double 3/4 column 1/3 page square	\$8000 \$1000 \$900 \$1500 \$1000 \$800 \$650 \$500 \$500 \$500	1/3 PAGE SQUARE 4.875" x 4.875"	DOUBLE 3/4 COLUMN 4.875" x 7.375"	FULL PAGE No bleed: 8.375"x 10.875" Bleed: 8.875" x 11.375"

TERMS & CONDITIONS

Special Requests: Placement of each ad in the issue is assigned at the time of final layout. Preferences for positioning of ad, while not guaranteed, will be honoured within production limitations. Advanced booking is recommended for preferred positioning of ads.

Terms: 30 days net (no cash discount). Invoice dated on day of distribution. GST is an additional 5%. Rates are subject to change without notice. No agency discounts. Interest at 2% per month will be charged on all overdue accounts. Cancellation deadline is 30 days prior to issue date.

I, as duly authorized representative of the company identified above, do hereby authorize the above listed advertising insertion(s) in the CSEG RECORDER and agree to all terms and conditions.