

NEW LEAF DISTRIBUTING COMPANY – EVOLVE! ADVERTISING INSERTION ORDER

401 Thornton Road Lithia Springs, Georgia 30122-1557 · 770-948-7845 · Fax 770-944-2354

1. VENDOR · AD INSERTION INFORMATION

Date: _____

All ads must be accompanied by an advertising contract. We need one insertion order per advertisement.

Vendor Code: _____

Vendor / Company Name _____

Prominent title in ad _____

Ad Size	Dimensions	Rate	or	Enter Multiple Rate Here*
<input type="checkbox"/> Full Page	(7-1/4" W x 10" H) or (8-3/4" W x 11-1/4" H bleed)	\$1,375		\$ _____
<input type="checkbox"/> Half Page Wide / Tall	(7-1/4" W x 4-3/4" H) / (3-1/2" W x 10" H)	\$935		\$ _____
<input type="checkbox"/> Quarter Page	(3-1/2" W x 4-3/4" H) (not available for specials)	\$550		\$ _____
<input type="checkbox"/> Eighth Page	(3-1/2" W x 2-1/4" H) (Holiday Showcase only)	\$300		\$ _____
<input type="checkbox"/> Spread	(2 full facing pages)	\$2,475		\$ _____
<input type="checkbox"/> First Page	(7-1/4" W x 10" H) or (8-3/4" W x 11-1/4" H bleed)	\$1,850		\$ _____
<input type="checkbox"/> Inside Front Cover	(7-1/4" W x 10" H) or (8-3/4" W x 11-1/4" H bleed)	\$1,950		\$ _____
<input type="checkbox"/> Back Cover	(7-1/4" W x 10" H) or (8-3/4" W x 11-1/4" H bleed)	\$2,200		\$ _____
<input type="checkbox"/> Front Cover w/Full Page	(Call for info. Must be reserved prior to submission)	\$3,000		\$ _____
<input type="checkbox"/> Front Cover w/IFC Spread	(Call for info. Must be reserved prior to submission)	\$3,495		\$ _____

* Discounts apply to multiple ads in the same annual issue. Call Ad Coordinator for rate quote.

Files supplied: CD Email or New Leaf to create ad (See Section 2 below.) Reprint from: _____

2. DESIGN SERVICES

If you want New Leaf to design your advertisement, the cost is normally \$350 for a full page design. The price can vary, however, due to the number of products in the ad or other factors. Please email graphics@newleaf-dist.com for a quote on your specific project and enter the agreed upon amount in the field below prior to submitting your distribution order. Payment for all services is due prior to beginning any work on advertisement.

\$ _____

3. TOTAL COST OF ADVERTISEMENT

Add the totals of section 1 and 2. Enter the total amount of all charges for this advertisement. \$ _____

Discount type or authorization: _____ Discount amount: – \$ _____

Total amount due: \$ _____

4. PAYMENT

Check/Money Order made payable to New Leaf Distributing Company enclosed. Please include product name on lower left of check (memo line).

Please charge my credit card: VISA MC Card #: _____ Exp.Date _____ CVV _____

Cardholder Name: _____ Cardholder signature: _____

Cardholder Billing Address: _____

Phone Number _____ Fax Number _____

Who to call if we have questions _____ E-mail _____

Authorizing Signature _____

Please complete all information on the form and return with payment. Mail to: Advertising, 401 Thornton Road, Lithia Springs, GA 30122 or Fax to 770-944-2354 or email to ads@newleaf-dist.com. All emails should include vendor name and file name of ad graphic in subject line.