

# New Leaf Distributing Company Vendor/Product Information Form – Magazines

Please print legibly or type.

Vendor Name: \_\_\_\_\_

Note: Checks will be made out to this name unless you specify a different payee below.

Publisher Name: \_\_\_\_\_ Account #: \_\_\_\_\_ (if you've assigned one to New Leaf)

<b>Main Address:</b>	<b>Contact Information</b> <b>Payee/Payment Address:</b> <i>(Please specify Payee if different from above.)</i>	<b>Returns Address (no PO Box):</b> <i>(You <u>must</u> provide a physical address for returns.)</i>
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Website: \_\_\_\_\_

Main Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax #: \_\_\_\_\_

Accounting Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax #: \_\_\_\_\_

Returns Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax #: \_\_\_\_\_

Promo Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax #: \_\_\_\_\_

### Terms

Discount: New Leaf's Discount is 55% off the cover price.  
Freight: Paid by Vendor

Payments: New Leaf pays on invoice.  
Vendor Return: Affidavit.

### Product Information

Magazine Title: \_\_\_\_\_

Bar Code: \_\_\_\_\_

Number of Months an Issue Covers: \_\_\_\_\_ (Ex.: If quarterly, enter 3)  
 Number of Issues per Year: \_\_\_\_\_ (Ex.: If quarterly, enter 4)  
 Number of Days for Returns: \_\_\_\_\_ When is last day we can return unsold magazines for credit?  
 Cover Price (\$): \_\_\_\_\_

**\*\* Please check all promotion that applies \*\***

Visit <http://www.newleafvendors.com/ads/> for more information on the advertising options available to you.

<b>Introductory Packages</b> <i>You must choose one of the packages below to satisfy your minimum promotional requirement.</i> <input type="checkbox"/> Initiation Package <input type="checkbox"/> Take Me Higher Package <input type="checkbox"/> Bliss Package <input type="checkbox"/> Nirvana Package	<b>Additional Options</b> <input type="checkbox"/> E-Flyer Distribution <input type="checkbox"/> Enhanced Exposure E-Flyer <input type="checkbox"/> Enhanced Product Detail Page <input type="checkbox"/> Web Ads (see rate kit for details) <input type="checkbox"/> Discounted Ads in New Leaf Month Update <input type="checkbox"/> Weekly E-Leaves E-mail
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Please return this form via fax or mail to:

Attn Kelly Rowland, New Leaf Distributing Company, 401 Thornton Road, Lithia Springs, GA 30122-1557  
krowland@newleaf-dist.com / 770.948.7845 (Main) / 770.944.2313 (Fax)