

RETURN ORDER FORM TO:

SALES@WeAreTheObserver.com
or call your sales contact.

ADVERTISER INFORMATION

COMPANY NAME:

COMPANY ADDRESS:

ADVERTISER CONTACT (NAME):

OFFICE PHONE:

CELL PHONE:

EMAIL:

CREDIT CARD INFORMATION

WE REQUIRE A CREDIT CARD ON FILE TO PLACE ALL ADS.

NAME ON CARD:

CARD NUMBER:

EXP DATE:

SECURITY CODE:

BILLING ZIPCODE ON CARD STATEMENT:

CARD TYPE:

VISA DISCOVER MASTERCARD AMEX

NAME:

SIGNATURE:

BILLING CONTACT IS SAME AS ADVERTISER CONTACT

BILLING CONTACT (NAME):

OFFICE PHONE:

CELL PHONE:

EMAIL:

PAYMENT AGREEMENT

CREDIT
CARD

I agree to pay for this order by credit card. All amounts not paid in full with the acceptance of this order will be charged on the 15th of the month prior to the print issue in which the advertisement is scheduled. For repeating insertion orders, I give consent to bill my credit card for the agreed amount for each month my advertisement is run. A copy of the invoice and payment receipt will be sent to the email address above.

CHECK

I agree to pay for this order by check. All amounts not paid in full with the acceptance of this order will be due by the 15th of the month prior to the print issue in which the advertisement is scheduled. A copy of the invoice and payment receipt will be sent to the email address above. Mail check payable to **WV Independent Observer LLC**, PO Box 3088, Shepherdstown WV 25443-3088.

DATE:

ADVERTISEMENT DETAILS

AD FORMAT::

- | | |
|--|---|
| <input type="checkbox"/> FULL PAGE | <input type="checkbox"/> FULL PAGE - SPECIFIED PAGE |
| <input type="checkbox"/> 1/2 PAGE HORIZONTAL | <input type="checkbox"/> 1/2 PAGE VERTICAL |
| <input type="checkbox"/> 1/3 PAGE HORIZONTAL | <input type="checkbox"/> 1/3 PAGE VERTICAL |
| <input type="checkbox"/> 1/4 PAGE SQUARE | <input type="checkbox"/> 1/4 PAGE BANNER |
| <input type="checkbox"/> 2/3 COLUMN | <input type="checkbox"/> BUSINESS SQUARE |
| <input type="checkbox"/> PRINT SPOTLIGHT | <input type="checkbox"/> ONLINE SPOTLIGHT |

SCHEDULE:

START DATE: _____

COMMITMENT DATES: Place an X in the box beside of each month you would like your ad placed.

- | | | |
|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> JAN | <input type="checkbox"/> MAY | <input type="checkbox"/> SEP |
| <input type="checkbox"/> FEB | <input type="checkbox"/> JUN | <input type="checkbox"/> OCT |
| <input type="checkbox"/> MAR | <input type="checkbox"/> JUL | <input type="checkbox"/> NOV |
| <input type="checkbox"/> APR | <input type="checkbox"/> AUG | <input type="checkbox"/> DEC |

NOTES OR INSTRUCTIONS:

INSERTION APPROVAL PREFERENCE

Use the same ad each month until I contact you with a change.

Please contact me each month to determine if I will be changing my ad content.

AD SUBMISSION CHECKLIST

I will submit my ad by the 15th of each month for print in the following month's issue of The Observer.

I will submit my ad as a PDF in CMYK color mode.

I would like the art department at The Observer to design my ad. I will provide my high resolution logo, photos, and other design elements. I understand that an ad design fee will depend upon ad size and type of ad.

I understand that I am accountable for reviewing my observer-designed ad by the 20th of every month, and providing approval via email.