



Published and emailed each week, **E-Leaves** contains important news about hot selling items such as author TV appearances, buyers' picks, and special promotions. The format alternates between Coming Attractions and Fresh Stock (newly received items) and lists many new titles and sidelines each week.

E-LEAVES ADVERTISING ORDER FORM

Send this form: by fax to 770-944-2354 or mail to
401 Thornton Road * Lithia Springs * GA * 30122 * 770-948-7845 phone

Date: _____ Person placing ad order: _____

Vendor Account Name: _____ Vendor Account Code: _____

Who to call if we have questions: _____

Phone #: _____ Fax #: _____

Email: _____

Please advertise the following item in your customer E-Leaves newsletter. Limit one (1) title or product per ad.

Product Name: _____ ISBN or UPC: _____

NOTE: Your product must be on our website with image and description to participate in this program!

Please verify using the search engine on www.newleaf-dist.com to view your product before ordering.

Ad insertion Fee is \$60 per week (per title)	\$	60.00
Number of weeks to run ad:	X	_____
Subtotal	=	_____
Less Multiple Insertion Discount (see table below)	-	_____
Consignment Discount (50% off total for vendors with consignment terms)	-	_____
Total:	\$	_____

Multiple Ad Insertion Discount Pricing:

2 weeks @ \$50.00/week	Subtract \$20 from subtotal above
3 weeks @ \$45.00/week	Subtract \$45 from subtotal above
4 weeks @ \$37.50/week (** your best bargain!!)	Subtract \$90 from subtotal above
5 weeks or more @ \$40.00/week	Subtract an additional \$20 from subtotal for each week above 4 weeks

Payment is due when ad order is submitted. Send check, credit card information (Visa, MasterCard only) or co-op contract to:

New Leaf Distributing Company, 401 Thornton Road, Lithia Springs, Georgia 30122-1557 Attn: Advertising Coordinator.

Check/money order enclosed. Co-op contract enclosed Charge my credit card: Visa MasterCard

Credit card # _____ Exp. Date _____

CC Name _____

CC Billing Address _____

City _____ State _____ Zip _____

Co-op contract information _____

Authorized signature _____ Contact phone number _____

Please fax completed insertion order to **Advertising Coordinator at 770-944-2354**. Questions? Email inquiries to ads@newleaf-dist.com. Email approved ad materials to ads@newleaf-dist.com or mail to **New Leaf Distributing** at above address. Visit www.newleafvendors.com for more information.