

# Web Advertising Insertion Order Contract

New Leaf Distributing, 401 Thornton Road Lithia Springs, Georgia 30122-1557 • 770-948-7845 X-3047 • Fax 770-944-2354

No Cancellations. If you place an ad order for a publication and then do not turn in your ad, you will be charged for the ad.  
You may submit your ad at a later date within the same calendar year. There will be no refund.

## 1. VENDOR • ADVERTISING INFORMATION

Each Web Advertisement must be accompanied by an Advertising Insertion Order Contract.

Date: \_\_\_\_\_

Vendor / Company Name \_\_\_\_\_

Vendor Code \_\_\_\_\_

Contact Name \_\_\_\_\_

Contact Phone \_\_\_\_\_

Contact Email \_\_\_\_\_

Contact Fax \_\_\_\_\_

## 2. Web Advertisements run for a duration period of 1 Month. Multiply the Cost by the number of Periods (Months) you want your ad to run.

Public Home Page	Size in Pixels	Cost		Duration	Total
<input type="checkbox"/> Banner	800 W x 112 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Double Wide	320 W x 80 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Double Deep	160 W x 160 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Small	160 W x 80 T	\$ _____	x	_____	= \$ _____
<b>Log-In Page</b>					
<input type="checkbox"/> Banner	800 W x 112 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Double Wide	160 W x 240 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Double Deep	160 W x 160 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Small	160 W x 80 T	\$ _____	x	_____	= \$ _____
<b>Logged-In Home Page</b>					
<input type="checkbox"/> Banner	800 W x 112 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Double Wide	160 W x 240 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Double Deep	160 W x 160 T	\$ _____	x	_____	= \$ _____
<input type="checkbox"/> Small	160 W x 80 T	\$ _____	x	_____	= \$ _____

Please name the Months you want your ad to run : \_\_\_\_\_

3. Link My Ad To:  All Active Titles/Products under this Publisher/Imprint/Vendor

Or To:  This list of ISBNs/UPCs \_\_\_\_\_

## 4. PAYMENT

Authorizing Signature (This is a contract - Signature obligates payment) \_\_\_\_\_

Who to call if we have questions \_\_\_\_\_ Email \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

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: \_\_\_\_\_

Email the completed contract and advertising art to [Ads@newleaf-dist.com](mailto:Ads@newleaf-dist.com)  
If mailing a check, then print this form and mail to: Advertising, 401 Thornton Road, Lithia Springs, GA 30122