



## 2010 Bi-Monthly E-Newsletter Advertising Rates

*The SACDV E-Newsletter is published bi-monthly with a circulation of over 400 emailed to all principals and the salespeople of member firms.*

Deadline for Ads	Issue	Ad Due Date	Distribution Date
	January/February	Dec. 15th	January 15th
	March/April	February 15th	March 15th
	May/June	April 15th	May 15th
	July/August	June 15th	July 15th
	SHOW EDITION*	August 15th	September 1st
	October	August 15th	October 15th
	November/December	October 15th	November 15th

*All advertising materials must be received by this date to be included.*

*\* Advertising available to SACDV Fall Promotions Expo exhibitors only.*

**Ad Requirements:** Submit art to size in JPG or GIF formats. 72 DPI.

**Ad Restrictions:** You do not have to be a member of SACDV to place an ad in the Newsletter.

Ad Rates per Month:	Size	Member	Non-Member
	Logo Only with Link 150 x 150 pixels (2.083 x 2.083")	\$30.00	\$70.00
	Vertical Banner Ad with Link 300 pixels Wide x 400 pixels High (4.167 x 5.556")	\$55.00	\$95.00
	Horizontal Banner Ad with Link 300 pixels Wide x 200 pixels High (4.167 x 2.778")	\$45.00	\$85.00

**Color Ads:** All ads are full color

**Full Year Advertising:** 6 Time Ad Placements - Deduct 10%.

**Payment Terms:** All ads are prepaid. Full payment must accompany artwork by deadline.

**Send Payment & Ad Placement Form To:** SACDV Office o Attn: Jim Harmon • PO Box 674 • Downingtown, PA 19335

**Send Artwork & Inserts To:** newsletter@sacdv.org • HB Originals • Attn: Laura Schlegel • 102 West Seventh Avenue • Trappe, PA 19426  
(please include copy of ad placement form)

*Ad rates effective through December 2010*



## 2010 Ad Placement Order Form

*Please complete all information and return with art to size and payment.*

<input type="checkbox"/> Logo Only	@ \$30 member / \$70 non-member per month	\$ _____
<input type="checkbox"/> Vertical Ad	@ \$55 member / \$95 non-member per month	\$ _____
<input type="checkbox"/> Horizontal Ad	@ \$45 member / \$85 non-member per month	\$ _____
	Sub Total	\$ _____

### *Month(s) For Ad Placement(s)*

- January/February
- March/April
- May/June
- July/August
- Show Edition (for SACDV Fall Promotions Expo exhibitors only)
- October
- November/December

X \_\_\_\_\_ Number of Ads Placed

Sub Total \$ \_\_\_\_\_

\* **Full Year Advertising Discount (6 issues)**

Deduct 10% \$ \_\_\_\_\_

Total Enclosed \$ \_\_\_\_\_

**Payment Terms:** All ads are prepaid. Full payment must accompany artwork by deadline.

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### **Please Bill My Credit Card for My SACDV Newsletter Ad(s)**

*Please print clearly*

Card Holder Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CCV #: \_\_\_\_\_

Authorized Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature for Ad Placement: \_\_\_\_\_ Date: \_\_\_\_\_

Company Name: \_\_\_\_\_