

# 2021 Pennsylvania Township News Advertising Contract

**YOUR INFORMATION** Fill out this contract completely, make a copy for your records, and return this page to the address or fax number below.

Company _____ Address _____ City _____ State _____ Zip Code _____ Contact Person for Advertising _____ E-Mail Address _____ Office Phone with Area Code _____ Cell Phone with Area Code _____ ( ( ) ) ( ( ) ) Date _____ Contact Person for Billing (if different than person above) _____ E-Mail Address _____ Signature of contact person (Execution of this advertising contract signifies assumption of legal responsibility to pay for all advertising in accordance with the terms and conditions set forth herein) ▼	Advertising Agency (if advertiser has one) _____ Address _____ City _____ State _____ Zip Code _____ Contact Person at Agency _____ E-Mail Address _____ Telephone with Area Code _____ Fax with Area Code _____ ( ( ) ) ( ( ) ) Date _____ Contact Person for Billing (if different than person above) _____ E-Mail Address _____ Signature of Agency Representative (Execution of this advertising contract signifies assumption of legal responsibility to pay for all advertising in accordance with the terms and conditions set forth herein) ▼
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## PAYMENT INFORMATION

Payment by:

- Invoice us mo. of publication.     Invoice us for entire year.
- Bill my credit card for the full year of advertising now.
- Bill my credit card for each month my ad runs, upon publication.
- VISA     MasterCard     Discover  
(We do **not** take American Express.)

Card Number \_\_\_\_\_  
 Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Three-digit security code \_\_\_\_\_  
 Print name as it appears on card \_\_\_\_\_  
 Credit card billing address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Note: All checks should be payable to PSATS.**

## SPACE RESERVATION

**Display Advertisers Only** (Please fill in the appropriate information for the months you want to advertise.)

**SEE EXAMPLE**

ISSUE	AD SIZE	AD RATE PER INSERTION	COLOR COST (if applicable)	SPECIAL POSITION COST (IFC/IBC/BC if applicable)	TOTAL COST PER AD	NET COST PER AD (agencies only)
JAN	1/3 V	\$460	N/A	N/A	\$460	
JAN						
FEB						
MAR						
APR						
MAY						
JUN						
JUL						
AUG						
SEP						
OCT						
NOV						
DEC						

## BILLING

(Display Advertisers — Please check one.)

- Bill Advertiser
- Bill Agency

## Engineers, Solicitors, and Other Professional Card Advertisers

Note: All professional card space must be paid in advance.

- Please reserve one year's advertising space starting in the next available issue. Enclosed is our check for one full year of advertising. (See rates below.)
- We are a member of the Township Engineers or Solicitors Associations. Advertising rate: \$725 a year.
- We are an associate member.
- We are **not** a member of the Township Engineers or Solicitors Associations. Advertising rate: \$825 a year.
- Please send us information on how to become a member of:
  - Engineers Association
  - Solicitors Association

## RETURN TO:

PSATS, 4855 Woodland Drive, Enola, PA 17025-1291  
 Fax: (717)763-9732    Email: glinn@psats.org    Phone: (717) 763-0930, ext. 127

CLIP HERE AND RETURN THIS PAGE TO THE ADDRESS BELOW

