



Lions Publications – Salt Spring Island Directory

Date: _____

ADVERTISING PURCHASE ORDER FORM

Advertiser Name: _____	Contact Person: _____
Mailing Address: _____	Phone No: _____
_____	Fax No: _____
_____	Email: _____

SECTION #1 - Repeat Last Year's Advertising Exactly
 Use this section if you are ordering the same advertising as per our letter.
 Cost to repeat as quoted in renewal letter.

SECTION #2 – Display Advertising

Display Ad Size	Location (CL or HC)*	Price
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

* We **WILL NOT** guarantee the location of ANY display ad; however we will do our best to comply.
Full Colour Glossy Advertising Insert ¼ page ad located on the special inserts are on a first come first serve basis please contact the office if you want one. Cost \$525.00 _____

Total Cost of display ads: _____

SECTION #3 – Alphabetical Bold Face Listing

How many alphabetical bold face listings?: _____ x \$25.00 ea = _____

1 Bold listing is included with every display ad – Use these lines to show wording for your Bold Listing

SECTION #3 – Business Classified & Health Care Listings

Business classified listings (CL): How Many? _____ X \$55.00 = _____

1 Business Classified is included with every display ad unless otherwise stated on price sheet

Health care listings (HC): How Many? _____ X \$80.00 = _____

If a Health Care listing is wanted with a display ad instead of a CL an additional \$50.00 will be charged

Maximum Number of Keystrokes allowed (letters, spaces & punctuation all count as 1). If you go over you will be charged for an additional ad. **Business Classified – 250 Health Care -100** (There are 50 spaces per line)

1. Type of listing(HC or CL) _____ **Classification:** _____

Business Name: _____

Classified _____

Address: _____ Phone No: _____

Email: _____ Website _____

Slogan: Max 50 characters. Slogan not available in Health Care _____

2. Type of listing(HC or CL) _____ **Classification:** _____

Business Name: _____

Classified _____

Address: _____ Phone No: _____

Email: _____ Website _____

Slogan: Max 50 characters. Slogan not available in Health Care _____

3. Type of listing(HC or CL) _____ **Classification:** _____

Business Name: _____

Classified _____

Address: _____ Phone No: _____

Email: _____ Website _____

Slogan: Max 50 characters. Slogan not available in Health Care _____

Please return this form with payment attached, no later than February 15th to: Lions Publications 103 Bonnet Ave, Salt Spring Island, B.C. V8K 2K8 QUESTIONS???. Call 537-2000 Fax 537-2099 Email lionsdirectory@telus.net or pop into the office	Subtotal of ALL advertising \$ _____ Adjustments: \$ _____ TOTAL COST: (prices includes all taxes) \$ _____
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PAID BY: CASH CHEQUE # _____ VISA/MC # _____ Ex. date _____

Invoice No. _____

Receipts: Requested

Sent or Given Out

