

**1**

Advertiser Name \_\_\_\_\_

Agency Name \_\_\_\_\_  
IF APPLICABLE

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

Billing Address \_\_\_\_\_  
STREET

\_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**2**

Indicate the size and type of the ad you intend to place in the *Directory*:

- full page, ~~color~~..... \$655  
*premium positions: page 1, inside front cover*  
***sold***
- full page, **color**..... \$575  
*premium positions: center spread left, ~~inside back cover, page 2, center spread right~~ ***sold****
- full page, **color**..... \$525
- full page, **B&W/grayscale** ..... \$315
- 1/2 page, horizontal, **color**..... \$315
- 1/2 page, horizontal, **B&W/grayscale** ..... \$210
- 1/4 page, **color** ..... \$210
- 1/4 page, **B&W/grayscale**..... \$130
- 1/8 page, **B&W/grayscale**..... \$80

For ad art specifications, see reverse.

**4**

**Return this completed contract, along with full payment, to:**

MCIA  
1900 Hendon Ave  
Saint Paul, MN 55108

**Please submit your ad art at the same time as your payment.**

**Email ad art to:**

alan.makinen@mncia.org

**Deadline for ad art:**

**September 8, 2017**

**3**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

<p><b>FOR MCIA OFFICE ONLY</b></p> <p>CONTRACT RECEIVED: AD ART RECEIVED: AD ART PROOF RECEIVED:</p>	<p>CHECK NO.: AMOUNT: DR:</p>
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# Ad Art Specifications: 2018 MCIA DIRECTORY

