



2019 Advertising Insertion Order

Company Name: _____

Contact Name/Title: _____

Mail Address: _____

City, State, ZIP: _____

Phone: _____ Fax: _____ e-mail: _____

FSPA Member Company: Yes (20% discount applies) No

Ad Frequency: 1 Time 6 Times 12 Times

Ad Size (check appropriate box)				Color (Higher rates apply)			
	Horizontal		Vertical	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Spread		Full Page	Special Position Request			
	1/2 Pg Sprd		1/2 Page	<input type="checkbox"/> Back Page (+30%) <input type="checkbox"/> Page 3 (+20%)			
	1/2 Page		1/4 Page				
	1/4 Page (a)						
	1/4 Page (b)						
Issues of Run - 2019 (check all appropriate boxes)				Issues of Run - 2020 (rates may increase) (check all appropriate boxes)			
	Jan		Feb		Mar		Apr
	May		June		July		Aug
	Sep		Oct		Nov		Dec
Authorized Signature: _____							

For more information contact Charis Tyson • E-mail: ctyson@FloridaPoolPro.com
 Phone: (941) 952-9293 Ext. 103 • Toll-free: (866) 930-FSPA • Fax: (941) 366-7433
 2555 Porter Lake Drive, Suite 106 • Sarasota, FL 34240



For office use only Rec'd _____ Art _____ Billing _____	Monthly Base Cost: \$ _____ Extras: \$ _____ Discounts: \$ (_____) Total Monthly Due: \$ _____ Total Contract: \$ _____
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