

# VETERANS POST ADVERTISING CONTRACT

1441 Dr MLK Jr Street South  
Saint Petersburg, FL 33705

Phone: 727-VA-2-VETS  
Fax: 727-VA-2-NEWS

VeteransPost@aol.com

Company/Individual Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Telephone & Contact Name: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Size of Ad: \_\_\_\_\_

Number of Issues and starting month: \_\_\_\_\_

Specify Months: 3mth 6mth **All** Jan Feb Mar Apr May Jun Jul Aug Sept Oct Nov Dec

Camera Ready Artwork? **Yes No** With Color? **Yes (Specify Areas w/color) No**

Do you want a proof? (via fax or e-mail) **Yes No**

Additional Charges \_\_\_\_\_

Total monthly cost of ad(s): \_\_\_\_\_

Invoices to be paid by 25<sup>th</sup> of the month prior to printing. Late fee of \$25, will be charged after the 28<sup>th</sup> of each month invoice is not paid.

Invoice To: \_\_\_\_\_

A fee of \$25.00 will be charged to all returned checks and \$35.00 for all credit card stoppage.

Will Pay In Full Or Quarterly In Advance By Check/M.O. (Made payable to Veterans Post News)

Monthly Payments By Credit Card (circle one): Discover / Visa / MasterCard

**CC#** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **CC:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_ **ST:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

Authorized Signature for Charges: X \_\_\_\_\_

Additional Terms to Contract (if any): \_\_\_\_\_

Terms Agreed By Both Parties:

\_\_\_\_\_  
Account Rep./Vets Post

Signature Title Date

Signature Title Date

**www.VeteransPostNews.com**