

# 2019 INSERTION ORDER



**For WHOLESALE DISTRIBUTORS & BROKERS TO ADVERTISE  
in the 2019 Southern Annual Meeting Magazine**  
*Technical specifications are enclosed.*

**Return completed form to:** SAWD, 3459 Lawrenceville Suwanee Road, Ste. C, Suwanee, GA 30024-6427  
Email: Betsy@ramamc.com Ph: 770-932-3263 Fax: 770-932-3263

**All artwork/copy must be received by March 15, 2019.**

**Please note:** The entire magazine is being printed 4-color process. Please submit your ads accordingly. We appreciate your support of this publication in the past and are making every effort to keep this as easy as we can for you.

✓	Ad Size	Cost	Total
( )	Full Page (7.5" x 10")	\$ 750.00	
( )	Half Page (7.5"x4.625" Horiz.) or (3.625"x10" Vert.)	\$ 600.00	
( )	Quarter Page (7.5"x 2.3125" H) or (3.625"x4.625" V)	\$ 550.00	

<input type="checkbox"/> Repeat 2018 ad	<input type="checkbox"/> My Check Payable to "SAWD" is Enclosed
<input type="checkbox"/> New/Corrected copy for 2019 ( <i>copy enclosed</i> )	<input type="checkbox"/> Please Charge My Credit Card ( <i>Complete Credit Card Authorization Below</i> )

I will need help with the design of my ads.

Company: _____	Name of Advertising Contact: _____
Address: _____	
Email: _____	
Phone: ( ) _____ Ext: _____ Fax: ( ) _____ (800) _____	
Date: _____	Signed: _____

### CREDIT CARD PAYMENT AUTHORIZATION

Please charge to credit card (*check the card you want the charges to apply to*):

Expiration Date: \_\_\_\_\_



Name as it appears on card: \_\_\_\_\_

Credit Card Verification Number: \_\_\_\_\_  
A three- or four-digit number *usually* located on the back of your credit card

Billing address for credit card (if different from above): \_\_\_\_\_

Card Number: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_