



# 2020 Advertising Insertion Order

Company Name: \_\_\_\_\_

Contact Name/Title: \_\_\_\_\_

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

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_

FSPA Blue Supplier Member:  Yes (20% discount applies)  No

Ad Frequency:  1 Time  6 Times  12 Times

<b>Ad Size</b> (check appropriate box)				<b>Special Position Request</b>			
	Horizontal		Vertical				
	Spread		Full Page	<input type="checkbox"/> Back Page (+30%)			
	1/2 Pg Sprd		1/2 Page	<input type="checkbox"/> Page 3 (+20%)			
	1/2 Page		1/4 Page				
	1/4 Page (a)						
	1/4 Page (b)						
<b>Issues of Run - 2020</b> (check all appropriate boxes)				<b>Issues of Run - 2021</b> (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](mailto: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



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