



Order Confirmation Form

Thank you for participating in the 2019/2020 Edition of Cool STUFF Made in Western Massachusetts. Please read over the following information, sign and return by mail, email, or hand directly to your representative.

Deadline to submit all materials is Aug. 30, 2019.

Company Name: _____

Company address: _____

Phone: _____

- 1 Page Profile Company size: ___ Under 50 employees
 2 Page Profile ___ 50 - 499 employees
 4 Page Profile ___ 500 or more employees

<i>(Over 50 employees)</i>	<i>(Under 50 employees)</i>
Full page : \$2,200	Full page: \$1,700
Two pages : \$3,520	Two Pages: \$2,720
Four pages : \$5,720	Four pages : \$5,720

<i>Display Advertising (Non-Manufacturing)</i>
Full page: \$2,700
Half page: \$1,600
1/3 Page: \$950
<i>Premium Positions</i>
Back Cover: \$5,000
Inside Cover: \$4,500

Total investment for our profile is \$ _____

Note: _____

A signed copy of this order and a deposit of 50% the total due are required at the time of placing this order. The other 50% will be billed when final copy and design is approved.

A separate form will outline the content you need to supply STUFF writers and designers with in order to complete your profile. Please submit all copy to be in Microsoft Word.doc format. All initial design work and one set of revisions/ corrections after the first proof is included. If any additional changes are made beyond the second proof (not including any typographical errors) a design fee of \$50 per hour will apply. In order for copy to be proofed and formatted, copy and photos are due 3 weeks after signing.

Please email copy and photos to:
 Bevin Peters
 peters@businesswest.com
 Phone: 413-781-8600 x 100 Fax: 413-781-3930

We will be paying our initial 50% deposit for our profile:

- with a credit card
- With a check
- We will pre-pay the balance in full and receive a 5% discount off the gross amount

If using a credit card, please select one:

- AMEX MasterCard Visa Diners BankCard

Credit Card Number: _____

Credit Card Expiration Date: _____ Security Code: _____

Please confirm that all information on this form is accurate and that you are the authorized representative.

Name (please print): _____ Title: _____

Signature: _____ Date _____

Presented By:

