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ADVERTISING SPACE CONTRACT

Advertiser: _____ Phone #: _____

Address _____

City _____ State _____ Zip _____

Send invoice to: _____ Attn: _____

Contract Period: _____ Charge/Mo.: _____ No. Months 1 4 6 12

Ad Size: _____ Color _____ Special Position _____

Product / Service Advertised: _____

Special Instructions: _____

_____ Fax No.: _____

Name / Person Authorizing Ad: _____

Email Address: _____

Signature: _____ Date: _____

A Woman's View Rep: _____ Date: _____

Payment Policy: Advanced payment is appreciated, however, payment is *due* 30 days from date of invoice. If payment is not received in 30 days, a late charge of \$8.00, in addition to the 1.5% interest will be added to late balance monthly. **Terms and Conditions:** The Publisher reserves the right to revise, edit or reject any or all copy. Advertiser agrees to hold harmless, indemnify and defend Publisher for and all causes of actions which third parties assert or attempt to assert due to advertisement placed by the advertiser. Advertiser represents that he/she will review and approve the advertisement and releases Publisher for any and all damages advertiser may sustain by reason of said advertisement. Advertiser agrees to compensate Publisher for all advertising per signed contract. Initial Here _____

