



## FOCUS on Mississippi Eye Care

Vendor and Sales Representative Advertisement Contract

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

Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

RATES: (all rates are quoted as black and white)

Quarter Page:	\$60 per issue	Business Card:	\$40 per issue
Half Page:	\$100 per issue	Flyer:	\$125 per issue
Full Page:	\$175 per issue	Classified:	30 cents per word

**COLOR: Please add \$100**

- Flyer – a camera-ready ad is to be supplied by the advertiser for insertion into FOCUS.
- The newsletter is printed every other month. The copy deadline is the first business day of the month preceding publication.
- All ads must be camera-ready unless prior arrangements have been made.

**The ad is to run in the following issues:**

- |                                  |                               |                                    |
|----------------------------------|-------------------------------|------------------------------------|
| <input type="checkbox"/> January | <input type="checkbox"/> May  | <input type="checkbox"/> September |
| <input type="checkbox"/> March   | <input type="checkbox"/> July | <input type="checkbox"/> November  |

Ad Sizes for FOCUS

Full page 7.5" x 9.85"	1/2 Page 7.5" x 4.9"
3/4 Page 7.5" x 7.5"	1/4 Page 7.5" x 2.3"

Please submit camera-ready ads by the first business day of the month prior to the issue date, i.e. for November FOCUS, please have your ad to us by Oct. 1. Electronic submissions preferred to [msoptometr@aol.com](mailto:msoptometr@aol.com) However, this form along with payment must reach us by the same deadline as the ad.

Advertisement Size: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Remit to: FOCUS on Mississippi Eye Care  
141 Executive Drive, Suite 5  
Madison, MS 39110