



Jewish Federation of the Lehigh Valley

# HAKOL AD ORDER CONTRACT

702 N. 22<sup>nd</sup> Street, Allentown, PA 18104

610-821-5500 x 323 | 610-515-1391  
hakolads@jflv.org | fax: 1-866-493-5889

Contract Date \_\_\_\_\_

HAKOL Advertiser PO # \_\_\_\_\_

HAKOL Ad Representative: Diane McKee

## ADVERTISER CONTACT AND PAYMENT INFORMATION

Advertiser Business Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Advertiser/Company Responsible for PAYMENT: \_\_\_\_\_

Provide Company NAME if Different from Advertiser Name

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

Provide address of company responsible for payment

Advertiser Payment Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

### SELECT AD SIZE(S): [BASE (SINGLE INSERTION) RATE(S) AS INDICATED]

<b>[\$1198]</b> Full Page 10" w x 16" h _____	<b>[\$652]</b> Half Page 10" w x 8" h _____	<b>[\$370]</b> Quarter Page 10" w x 4" h 8" w x 5" h 6" w x 6.625" h 4" w x 10" h _____	<b>[\$223]</b> Eighth Page 8" w x 2.5" h 6" w x 3.125" h 4" w x 5" h _____	<b>[\$155]</b> Small Square 4" w x 4" h _____	<b>[\$155]</b> Small Vertical 2" w x 8" h _____	Issue Sponsor /Other _____	<b>B&amp;W Discount</b> Full Page <input type="checkbox"/> \$200 Half Page <input type="checkbox"/> \$100 Quarter Page <input type="checkbox"/> \$50 Eighth Page <input type="checkbox"/> \$25 or Smaller <b>PREMIUM PLACEMENT</b> Full Page <input type="checkbox"/> \$300 <small>ea up</small> Half Page <input type="checkbox"/> \$225 Subject to Availability
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Indicate Month(s) Jun 21 \_\_\_\_\_ Summer 21 \_\_\_\_\_ Sep 21 \_\_\_\_\_ Oct 21 \_\_\_\_\_ Nov 21 \_\_\_\_\_ Dec 21 \_\_\_\_\_ Jan 22 \_\_\_\_\_ Feb 22 \_\_\_\_\_

Mar 22 \_\_\_\_\_ Apr 22 \_\_\_\_\_ May 22 \_\_\_\_\_ Jun 22 \_\_\_\_\_ Summer 22 \_\_\_\_\_ Sep 22 \_\_\_\_\_ Oct 22 \_\_\_\_\_ Nov 22 \_\_\_\_\_ Dec 22 \_\_\_\_\_

### Notes:

Your Frequency Discount Rate(s) \$ \_\_\_\_\_ x \_\_\_\_\_ Total # of Insertions = \$ \_\_\_\_\_  
Ad rate is based and due according to the number of ads.

Adjustments/Special (See Chart) \$ \_\_\_\_\_ x \_\_\_\_\_ # of Ads = \$ \_\_\_\_\_

AD ORDER Total \$ \_\_\_\_\_

Payments:  Paid in full  First ad pre-paid  Bill monthly / Pre-Payment Expected and Due as Invoiced

Check(s) Payable to: JFLV (Jewish Federation of the Lehigh Valley) \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_

Credit Card - Request Authorization form or online link

▶▶ **ACTION DATES & COPY INFORMATION:** Email Ad Copy to: [hakolads@jflv.org](mailto:hakolads@jflv.org)

Space Reserved by: 1st of the month prior to month of publication (Except Summer Issue by 6/21)

Is ad print ready & sized correctly?  YES  NO: If "NO" Immediately email logo, artwork, text

Non-print ready ads - Ad proof provided to above email OR to: \_\_\_\_\_

Submit ad modifications by 1<sup>st</sup> of month PRIOR to publication. Note: \$25/edit fee applies for 2+ complete ad re-designs.  
No Coupons Accepted in Ad Copy

PRINT READY COPY DUE by: 5th of the month prior to month of publication. (Except Summer Issue by 6/26)

Authorized by (SIGN HERE): \_\_\_\_\_ Title: \_\_\_\_\_

Advertiser OR Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Advertiser/Company Responsible for Payment  
**CONTRACT NON-CANCELLABLE BY ADVERTISER**

Please RETURN completed SIGNED contract to [hakolads@jflv.org](mailto:hakolads@jflv.org) or fax to 1-866-493-5889  
or mail to HAKOL • Jewish Federation of the Lehigh Valley • 702 N. 22nd Street • Allentown, PA 18104