



# Website Classified Ad Order Form

COMPANY NAME \_\_\_\_\_

DATE \_\_\_\_\_

SMA MEMBER  NON-MEMBER

CONTACT NAME \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

### SELECT CLASSIFIED AD SIZE: CHECK THE APPROPRIATE BOX BELOW [PRICE IS PER MONTH]

<b>1-40 WORDS</b>	<input type="checkbox"/> <del>\$20</del> \$10 SMA member	<input type="checkbox"/> <del>\$30</del> \$15 non-member
<b>41-80 WORDS</b>	<input type="checkbox"/> <del>\$40</del> \$20 SMA member	<input type="checkbox"/> <del>\$60</del> \$30 non-member
<b>81-120 WORDS</b>	<input type="checkbox"/> <del>\$60</del> \$30 SMA member	<input type="checkbox"/> <del>\$90</del> \$45 non-member
<b>121-160 WORDS</b>	<input type="checkbox"/> <del>\$80</del> \$40 SMA member	<input type="checkbox"/> <del>\$120</del> \$60 non-member
Additional words charged at \$.50/word (SMA Members) or \$.75/word (Non-members)		

AD TITLE: \_\_\_\_\_ Category:  EMPLOYMENT  FOR SALE  FOR RENT  OTHER

### YOUR AD TEXT: PLEASE PRINT LEGIBLY [OR SEND VIA EMAIL TO INFO@STUCCOMFGASSOC.COM]


### PAYMENT: CHECK OR CREDIT CARD ACCEPTED — ALL CLASSIFIED ADS MUST BE PAID IN ADVANCE

Check enclosed [payable to SMA]  MasterCard  VISA  AmEx  Discover

ACCOUNT # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

CARDHOLDER NAME [PLEASE PRINT] \_\_\_\_\_

SIGNATURE \_\_\_\_\_

### AD SUBMISSION CHECKLIST: 3 EASY STEPS

1. Complete this order form and FAX to SMA office: 949 701 4476
2. Optional: EMAIL your ad text to info@stuccomfgassoc.com
3. Call SMA office if you have questions: 949 387 7611

#### SMA OFFICE USE ONLY

START DATE \_\_\_\_\_

END DATE \_\_\_\_\_

EXTENDED \_\_\_\_\_

**SMA Executive Director, 500 East Yale Loop, Irvine, CA 92614**