

# Buy New England Classified Ad Network

700 Main Street, P.O Box 28, Willimantic, CT 06226  
Toll Free 877-423-6399; Fax 860-423-6391; E-Mail: bne@fcpcne.com

## INSERTION ORDER

**NEW CUSTOMER**  **\$25 Bonus or**

**Buy 3, Get 1 FREE**  **\$50 Bonus**

**Buy 10, Get 3 FREE**

Please fill in all information and print legibly.

Originating Publication \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

### Required Information for 1st Time Buyers\*

\*Salesperson (full name) \_\_\_\_\_

\*NEW Customer Name \_\_\_\_\_

\*NEW Customer Company \_\_\_\_\_

\*Address \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Phone \_\_\_\_\_

# of Weeks to run \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Weekly rate (retail) \$ \_\_\_\_\_

x # of ads = \$ \_\_\_\_\_

Total \$ \_\_\_\_\_ (retail)

BNE rate \$ \_\_\_\_\_ (1/2 of retail)

### Frequency:

1st 13 wks  2nd 13 wks

3rd 13 wks  4th 13 wks

Paid by Check # \_\_\_\_\_

Charge to  MC  Visa  Amex  
Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

**Ad Copy:** Category: \_\_\_\_\_

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(25 words)

**\$170.00 for 25 Words** - \$10.00 each add'l word as of Nov. 1, 2005 Please include payment with your ad or call BNE office.

Ads that do not conform to "Buy New England" guidelines for acceptable ad copy will be rejected by some or possibly all participating papers. Please check the guidelines before you accept an ad for "Buy New England." Ads must be submitted on this form. New customers must sign the BNE Terms & Conditions.

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## Vendor Insertion Order **\$170.00/25 WORDS**

**\$10. Each Additional Word**

Please fill in all information and print legibly.

Originating Seller \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

### Required Information for 1st Time Buyers\*:

\*Salesperson (full name) \_\_\_\_\_

\*NEW Customer Name \_\_\_\_\_

\*NEW Customer Company \_\_\_\_\_

\*Address \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Phone \_\_\_\_\_

# of Weeks to run \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Buy 3, 1 Free  Buy 10, 3 Free

### Frequency:

1st 13 wks  2nd 13 wks

3rd 13 wks  4th 13 wks

Weekly rate (retail) \$170.00

x # of insertions = \$ \_\_\_\_\_

Total Paid \_\_\_\_\_

Paid by Check # \_\_\_\_\_

Charge to  MC  Visa  Amex  
Card No. \_\_\_\_\_

Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

**Ad Copy:** Category: \_\_\_\_\_

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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