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## 2022 ADVERTISING INSERTION ORDER FORM

Company Name	
(as it should appear in	published Advertiser Directory)
Representative Na (print)	me
Email	
Phone Number _	
AD SIZE/TYPE  Spread  1/6 Page Vertic  1/12 Page	☐ Full Page ☐ 2/3 Page ☐ 1/2 Page Horizontal ☐ 1/3 Page Square ☐ 1/3 Page Vertical ☐ 1/6 Page Horizontal ☐ Classified (email text to address below)
PLACEMENT	
CHECK MONTHS  January  May  Septemb	February March April June July August er October November December
(see rate card for ra	tes) Payment Method
Credit Card #	Exp. Date CVV
Name on Card	
Billing Address	
	Date