

INSERTION ORDER

ADVERTISER: _____

PRODUCT: _____

INSERTION ORDER NUMBER _____

DATE: _____

DATES OF INSERTION: _____

AD NUMBER AND CAPTION: _____

AD SIZE & TYPE: _____

RATE: _____

POSITION REQUESTED: _____

MATERIAL: NEW AD MATERIAL MATERIAL WILL BE SENT TO ARRIVE BY: _____

RETURN MATERIAL TO AGENCY

RETAIN MATERIAL

ACKNOWLEDGEMENT REQUESTED

PICK-UP AD _____

BILLING INFORMATION

COMPANY _____

ADDRESS _____

CITY/STATE/ZIP _____

Billing Email Address: _____

IOWA Pork Producer

Please mail, email or fax your insertion order to:

Box 71009
1636 NW 114th Street
Clive, Iowa 50325

FAX 515-225-0563

For more information, contact Doug Fricke

800-372-7675

email: dfricke@iowapork.org