



AD PLACEMENT SUMMARY FORM

NABVETS REPRESENTATIVE INFORMATION

Representative

Name: _____

NABVETS Chapter: _____

Phone: _____

Email: _____

ADVERTISER INFORMATION

Advertiser Name: _____

Contact Person: _____

Email: _____

Mailing Address

Street: _____

Company

Phone: _____

City/State/Zip: _____

Date: _____

Desired Edition(s) for
Placement: _____

AD DESCRIPTIONS

Ad Measurement:

Text to be used: *(if placing a "Text Only" ad)*

Additional Comments / Information:

**** Please Refer to "Ad Submission Guidelines" Page for Ad Submission Instructions**

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