

ECHO CLASSIFIED FORM

Mail: Echo Classifieds, P.O. Box 16630, Phoenix, AZ 85011-6630.
Phone: 602-266-0550 • **Fax:** 602-266-0773 • **E-Mail:** classified@echomag.com

In which section would you like your ad to run?††† (CHECK ONE)

- ACCOMMODATIONS
- ANNOUNCEMENTS
- BUSINESS OPPORTUNITIES
- COMMERCIAL REAL ESTATE
- FOR SALE
- HELP WANTED
- HOME SERVICES†
- MESSAGE THERAPISTS††
- MERCHANDISE
- PROFESSIONAL SERVICES
- REAL ESTATE
- RENTALS
- ROOMMATES

NAME: _____

PHONE: _____

E-MAIL: _____

Your Ad:

PAYMENT BREAKDOWN:

Standard Classified:	\$ 18.00
Additional Words ___x \$.50 = (\$.50/ea.word after 19)	\$ _____
<input type="radio"/> Boxed Ad: \$6	\$ _____
<input type="radio"/> Color Boxed Ad: \$17	\$ _____
<input type="radio"/> Reversed Color Boxed Ad: \$19	\$ _____
<input type="radio"/> Bold or Caps: \$.50/word	\$ _____
<input type="radio"/> Oversized Type: \$.60/word	\$ _____
<input type="radio"/> Centering / Internal line breaks: \$3.50/line	\$ _____
<input type="radio"/> Color Photo: \$20/issue <small>Maximum size 1 column inch. Includes free online placement.</small>	\$ _____
Display Classified: \$50/column inch	\$ _____
Total Per Issue x ___# of Issues if multiple runs	\$ _____
<input type="radio"/> Web Hyperlink: \$10/issue	\$ _____
Grand Total	\$ _____

PAYMENT TYPE (Circle One): CASH CHECK MONEY ORDER VISA/MC*

Name on Card _____

Account # _____

Exp. Date ___/___ Security Code* ___

Billing Address _____

Billing ZIP Code* _____ *(Required to print ad)

Signature* _____

† Contractor license number or the words "Not a licensed contractor" must be included with contractor ads.
 †† Therapist section limited to licensed massage therapists only. License number must be on file and listed in ad.
 ††† Echo assumes no responsibility for category placement.

CLASSIFIED RATES

The minimum cost for a classified ad is \$18 (includes 19 words, Web placement and free bolding of first 3-5 words). Words joined by slash marks or other punctuation DO NOT count as one word. Additional words are charged at 50¢ per word. Please see form for additional options.

DISPLAY CLASSIFIED AD

\$50 per column inch. Call Dann Dykas 602-266-0550 for details.

PAYMENT

All ads must be PRE-PAID and SUBMITTED by mail, fax, e-mail or in person ONLY by the designated deadline date to make it to print.

DEADLINES

Ad copy and payment must reach Echo's office by noon eight business days before the publication date.

E-MAIL YOUR AD

E-mail your classified ad to classified@echomag.com. Be sure to include your name and phone number. If you are paying with Visa or MasterCard, you must fax us a signed authorization form.

FAX: 602-266-0773. Send checks or money orders to:

P.O. Box 16630, Phoenix, AZ 85011-6630.

FOR MORE INFORMATION

Contact Dann Dykas at 602-266-0550.

ADDITIONAL INFORMATION

CLASSIFIED DEADLINE IS 8 DAYS PRIOR TO PUBLICATION DATE

*All ads received after the deadline date will be printed in the following issue.
 PHONE-IN ADS WILL NOT BE ACCEPTED.