



5 STAR COUPON GUIDE

2701 Summer Street, Stamford, CT 06905

Phone: 203-975-1000 Fax: 203-975-8515 email: mail@5starcoupongide.com

ADVERTISING CONTRACT

ADVERTISER		BILLING ADDRESS (if different from advertiser)	
Name:		Bill to:	
Contact Name:		Attention:	
Address:	State:	Address:	State:
City:	Zip:	City:	Zip:
Phone:	Fax:	Phone:	Fax:

Advertising Frequency Ordered _____

(Note: Discounts are earend when transactions are all used within one year)

ISSUE	YEAR	PO#	AD SIZE	(H or V)	PRICE	AG DISC	PROD CHGS	PLMT	NET
JAN									
FEB									
MAR									
APR									
MAY									
JUNE									
JULY									
AUG									
SEP									
OCT									
NOV									
DEC									

Special Instructions: _____

TERMS: Payment due at time of signing. _____

**Notify publisher in Writing by ad close date
if change in ad copy will be necessary.**



Card# _____

Exp Date _____ Zip Code _____

Name on card _____

- If any publication error is made, publisher will reprint corrected ad in next issue of publication at no expense to advertiser, notify publisher immediately.
- There can be no cancellation after ad close date. Cancellations made before ad close date must be in writing.

Signature: _____

Date: _____

Printed Name: _____

Account Executive: _____

Date: _____