

ADVERTISING BOOKINGS

Tax Invoice issued once advertiser has returned this form completed.

Broome

STREET GUIDE 2013-14

PUBLICATION: April 2013 PROPOSED CIRCULATION: 60,000

1 CIRCLE AD SPACE /S PREFERRED

(back) (front)										
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ROAD INDEX			Regional Map		24	32	28	West Kimberley Map		
			25		Peninsula Map	29	Town Centre			
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SEE THE REAL STREET GUIDES AT www.andimaps.com.au

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65	Sunset Park	75	Blue Haze	66	Chinatown				70	12 Mile	46
64	Street Map NORTH			67	Street Map SOUTH			71	Locality Map		47
63	Roebuck Estate			68	Clementson St		1	72			48
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61	60	59	58	57	56	55	54	53	52	51	50

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AD ARTWORK DEADLINE: 31 JANUARY 2013

Same as last year OR Changes / New

TEXT supplied at time of booking or coming by/...../.....

LOGO / PICS / IMAGES supplied at time of booking or coming by/...../.....

This rectangle is the size of single ad space: 70mm x 45mm

Ad artwork proofs are always emailed to advertiser unless otherwise requested.

DISTRIBUTION: Broome Visitor Centre, advertisers, local businesses & visitor centres statewide

Locate your business on the map.

Receive large quantities free.

Ad artwork production included in advertising fee.

Discounts for multiple spaces in any Andimaps Street Guide.

2 (Tick applicable)

All prices include GST	\$460	<input type="checkbox"/>
Single space: 45mm H x 70mm W		
Premium space: #s 1, 74 45mm H x 70mm W	\$590	<input type="checkbox"/>
Double space: 45 H x 140 W or 95 H x 70 W	\$730	<input type="checkbox"/>
2 Single spaces: 45mm H x 70mm W each	\$780	<input type="checkbox"/>

DEPOSIT

Minimum = 50% of total amount within 14 days of invoice date.

3 TOTAL AMOUNT BOOKED \$ inc GST payable within 60 days of invoice date

4 PAYMENT METHOD
 EFT BSB 306 009 Andimaps Acc: 4434421
 • Please include business name or invoice no. when making payments. (Tick one)
 OR
 Cheque to 'Andimaps'

CANCELLATIONS

• Full amount refundable if cancelled within 7 days of booking date.
 • Cancellations after 7 days - 20% of full invoice amount retained.

6 Circle no. of copies required for 12 months:

50 200 400 800 1200

to be delivered to your premises upon publication (subject to availability)

7

BUSINESS NAME (bill to)

NAME APPEARING IN AD (if different from BUSINESS NAME)

STREET ADDRESS (for correct placement of your No. on map)

CONTACT PERSON BUS. PHONE

MOBILE / A/H (optional) FAX

EMAIL

WEB ...WWW.

POSTAL POSTCODE

8 ADVERTISER'S SIGNATURE DATE / /



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PRODUCER & PUBLISHER OF WA STREET GUIDES

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