

Date: _____

Meredith Publications
Required Reader Service Listing Information

Name of Advertiser: _____

Magazine Title: _____

Month/Issue of Listing: _____

Coop Advertisers running a 3" ad or smaller receive name only listing.

NAME: _____

All other advertisers please list name and copy below.

Listing:	Limit of 20 words, including heading. No 800 #'s, E-mail or Website addresses. We reserve the right to edit. Advertiser's name and literature cost will be included in listing copy. Listing information is due to Meredith Fulfillment Services on <u>issue ad closing date</u> .

LITERATURE COST: _____ (Cost to Reader)

**NAME AND ADDRESS OF PERSON
TO RECEIVE LEADS:**

NAME: _____

COMPANY: _____

STREET: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____

**NAME AND ADDRESS OF PERSON
TO RECEIVE BILLING OR REVENUE:**

NAME: _____

COMPANY: _____

STREET: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____

LEAD RETRIEVAL OPTIONS AVAILABLE:

An e-mail message will be sent to you with your advertising leads on an attachment each time there is a processing run.

Select Format Type: CSV (Excel) Comma Delimited Fixed Print Out Labels - PDF format 5160 template

E-MAIL Address: _____

Website: _____

E-MAIL, FAX OR MAIL BY AD CLOSE DATE TO:

{seller enter contact info here}

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