Journal
Classified Advertising

Today's Date:_____

Advertiser's Name:_____

Contact:_____ Phone No:_____

Address:_____

_____

_____

Dates of Publications: Jan Feb Mar Apr May Jun

(Circle all that apply) Jul Aug Sep Oct Nov Dec

Ad Copy:

_____

_____

_____

_____

_____

_____

_____

_____

_____

Word Count:_____ Charges:_____ Method of Payment:_____

***Rates: 50 cents per word, $25 minimum per ad per month. A word is one or more characters bounded by spaces.**