



**institute for  
supply management**

# ISM Online Supplier Directory

## Advertising Insertion Order Form

**Advertiser:** \_\_\_\_\_

**Agency/Contact Person:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Contract Period: Beginning** \_\_\_\_\_ **Ending:** \_\_\_\_\_

### Categories

- |  |   |
|--|---|
| <input type="checkbox"/> Auctions                          | <input type="checkbox"/> Logistics & Transportation     |
| <input type="checkbox"/> Business Services                 | <input type="checkbox"/> MRO Products & Services        |
| <input type="checkbox"/> Capital Equipment                 | <input type="checkbox"/> Office Supply/Office Furniture |
| <input type="checkbox"/> Computer Hardware and Peripherals | <input type="checkbox"/> Procurement Card Services      |
| <input type="checkbox"/> Consulting Services               | <input type="checkbox"/> Services (Other)               |
| <input type="checkbox"/> Ebusiness Services                | <input type="checkbox"/> Supply Management Software     |
| <input type="checkbox"/> Ebusiness Software                |   |

**LOGO: Format (circle one) .jpeg .tiff**

**6 Month Insertion/\$600 (minimum)**

**Gross Rate:** \_\_\_\_\_

**12 Month Insertion / \$1,200**

**Gross Rate:** \_\_\_\_\_

**First-time advertisers, please complete the following information.  
(Order will not be accepted without this section completed.)**

**Number of Employees:** \_\_\_\_\_ **Annual Sales:** \_\_\_\_\_

**Business Type:**  Corporation  Partnership  Sole Proprietor

**Date Business Established:** \_\_\_\_\_

**Tax Payer ID #:** \_\_\_\_\_ **Dun & Bradstreet #:** \_\_\_\_\_

Credit Application May Be Requested.

**I agree to all advertising terms and current rates.**

**Signature/Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please print your name as signed above:** \_\_\_\_\_

**E-Mail address:** \_\_\_\_\_

(Please retain a copy for your records.)

**Fax:** 480/752-7890 **Phone:** 800/888-6276 or 480/752-6276, extension 3049 or 3061

**E-Mail:** [curbaytis@ism.ws](mailto:curbaytis@ism.ws) or [kbraase@ism.ws](mailto:kbraase@ism.ws)

\_\_\_\_\_  
ISM Sales Representative