



Advertise in the 2019 OCAPA Membership Directory & Buyer's Guide

The OCAPA Directory & Buyer's Guide will contain alphabetical and product/service category sections. It will be printed and distributed to all producer and associate members. The online version will be viewable on any device and is searchable by keyword. *Call for a demo.*

Ad Size	Dimensions (w x h)	Full Color Rate	B&W Rate
A. Full Page	4 ¾ x 7 ¾" no bleed	600.00	425.00
B. Half Page	4 ¾ x 4" no bleed	475.00	350.00
C. One-Third Page	4 ¾ x 3" no bleed	400.00	275.00
D. Company logo (placed along company listing)	2 x 1"		25.00

Premium Placements – Contact Lori to confirm availability & selection

E. Back Cover (6x9" full bleed) (Allow for ¼" trim for all sides plus ½ for binding on right) 1 available	5.5 x 8.5	900.00	n/a
F. Inside Front Cover (6x9" full bleed) (Allow for ¼" trim for all sides plus ½ for binding on right) 1 available	5.5 x 8.5	900.00	n/a
G. Inside Back Cover (6x9" full bleed) (Allow for ¼" trim for all sides plus ½ for binding on left) 1 available	5.5 x 8.5	800.00	n/a
H. Section Divider (6x9" full bleed) (Allow for ¼" trim for all sides plus ½ for binding on left) Multiple sections available	5.5 x 8.5	700.00	600.00

Deadline: March 25, 2019

Publication Distribution: May 2019

Member Company to provide Adobe pdf file, 300 dpi, CMYK color, all type converted to outlines

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ORDER FORM (Complete and return to OCAPA; see opposite side for pricing)

Date: _____ (Date Received: _____)

Company: _____

Contact Name _____ Job Title: _____

Billing Address: _____

City _____ State: _____ Zip: _____

Best Phone: _____ Email: _____

Full Page – Size A: Full Color or B&W

Premium Placement Interest: *Available for any Full Page Color Ads*

(no obligation; choose all that apply we will contact you to confirm options based on availability)

Back Cover **OR** Inside Front Cover **OR** Inside Back Cover **OR** Section Divider

Half Page – Size B: Full Color or B&W

1/3 Page – Size C: Full Color or B&W

Add company logo to Directory listing (\$25)

Advertisement Amount: \$ _____

Logo in Directory listing: \$ _____

Total Amount: \$ _____

If you opt for a Premium Placement later, we will bill you the difference.

Signature Authorizing Purchase: _____

Payment Type: **Bill me** Purchase Order #: _____

Check enclosed Check#: _____ (Make checks payable to "OCAPA")

Credit Card (Visa or MasterCard only)

Name on Card: _____

Card Number: _____

Exp. Date (MM/YY): ____/____ Last 3 digits on back: _____

Statement billing address: _____

City: _____ State: _____ Zip: _____

Authorized Signature: _____