

The Lumber Log



A publication of the Lumber Association of California & Nevada

2012 Advertising rates and information

The **LUMBER LOG** is published electronically monthly by LACN and is the organization's official publication. With a mix of industry news, political and government affairs information, business advice, safety and management articles and industry opinion, the **LUMBER LOG** is an excellent choice for advertising. The **LUMBER LOG** is regularly e-mailed to nearly 1,000 LACN members and others, and often e-mailed to an additional 300+ in the industry.

Member Advertising Rates

(rate per month)

AD Size	1 Month	3 Months	6 Months	12 Months
Full Page	\$280	\$260	\$240	\$200
Half Page	\$200	\$180	\$160	\$120
Quarter Page	\$140	\$120	\$100	\$80
One Eighth Page	\$80	\$70	\$60	\$50

NON-MEMBER RATES ARE 1.5x MEMBER RATES. PAYMENT FOR NON-MEMBER ADS IS REQUIRED IN ADVANCE.

SIZE & FORMAT REQUIREMENTS

Ads should be submitted in either **WORD** format or a **JPEG** file.

Full page is 7 ½ x 10 in. Half Page is 7½ x 5 in (horiz) or 3 ¼ x 10 (vert)

Quarter Page is 3 ½ x 5 in Eighth page is 3 ¼ x 2 ½ .

Frequency rate discounts apply to ads purchased in the calendar year beginning January, 2011

Copy changes and ad rotations allowed. Ads or changes must be received by 15th of month prior to publication date. All ad sales are non-commissionable and not subject to brokerage.

AD Size [] Full page [] Half Page [] Quarter Page [] Eighth Page

FREQUENCY [] 12 mon rate [] 6 mon rate [] 3 mon rate [] 1 mon rate

(For less than 12 month frequency, note months ad is to run at frequency rate)

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

For additional information contact LACN Executive Director Ken Dunham at 800-266-4344 or kend@lumberassociation.org

Name: _____ Date: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____ Fax: _____

CHECK ENCLOSED FOR \$ _____

INVOICE US

MasterCard Visa American Express Discover

Card Number: _____ CCV-CSC#: _____ Expiration Date: _____

Name on Card: _____ Authorized \$ to Charge: _____

If company card - Company Name: _____

Cardholders Signature: _____

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