

# The Lumber Log

A publication of the WEST COAST LUMBER & BUILDING MATERIAL ASSOCIATION

WEST COAST  
**LUMBER &  
BUILDING MATERIAL  
ASSOCIATION**

## 2020 Advertising rates and information

The **LUMBER LOG** is published electronically monthly by WCLBMA 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 1,700 WCLBMA members and others, and often e-mailed to an additional 400+ in the industry.

### Member Advertising Rates

(rate per month)

<u>AD Size</u>	<u>1 Month</u>	<u>3 Months</u>	<u>6 Months</u>	<u>12 Months</u>
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, 2020

Copy changes and ad rotations allowed. Ads or changes must be received by 15<sup>th</sup> 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 appropriate frequency rate)

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

For additional information contact WCLBMA Executive Director Ken Dunham at 800-266-4344 or [kend@lumberassociation.org](mailto: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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