



## 2025 Directory Advertising FORM # 4

### Covers

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Billing Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail address \_\_\_\_\_

#### Place my ad on:

<input type="checkbox"/>	Back Cover @ \$1000
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<input type="checkbox"/>	Inside Front Cover @ \$500
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<input type="checkbox"/>	Inside Back Cover @ \$500
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Your ad copy should be a full color, CMYK, 300 dpi ad saved as a PDF file. There are no bleeds in these ads. Please send your ad as an electronic file to [dslaughter@gowv.com](mailto:dslaughter@gowv.com).

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**DEADLINE: December 20, 2024**

Please complete this FORM and return it with your PAYMENT to:  
Katie McCracken, GO-WV, 300 Summers Street, Suite 820, Charleston, WV 25301  
Voice: 304-344-9867 E-mail: [kmccracken@gowv.com](mailto:kmccracken@gowv.com).  
ALSO send the completed FORM with your ad copy to: Diane Slaughter, APR at  
[dslaughter@gowv.com](mailto:dslaughter@gowv.com).