Company/Organization					
Contact Name Contact	Γitle :				
Street Address:					
City	State	Zip Code	Phone (	)	
Email Address:					
□ INSIDE FRONT CO	OVER (8 ½" :	X 11") - \$ 300.00			
□ INSIDE BACK CO	VER (8 ½" X	11") - \$ 300.00			
□ FULL PAGE (8 ½"	X 11") - \$ 1	00.00 🗆 HALF PAGE	(8 ½" X 5 ½") - \$	50.00	
□ QUARTER PAGE	(5 ½" X 4") -	\$ 25.00			
□ BUSINESS CARD	- \$15.00				
	be made by	"camera ready" in J the printer and/or t			
TOTAL AMOUNT ENC	LOSED \$				
PRINT NAME	PRINT TIT	LE			
AUTHORIZED SIGNATUR	RE				
PLEASE RETURN THIS O	RDER FORM W	ITH PAYMENT AND AD OI	N OR BEFORE March 3:	1, 2019	
Ads and the Order Form SHOULD BE EMAILED to: Alvino Douglass @ alvino.douglass@yahoo.com					
TYPE YOUR NAME ON RELOADED COMMEN		T LINE OF THE EMAIL A UVENIR BOOKLET	S ILLUSTRATED ie: S	Subject: PROJECT	RHO PSI
UNIVERSITY RHO P 37209-1561. Make	SI ALUMNI checks or r	should be U. S. maile CHAPTER 3500 Johr money orders payab <u>mail.com</u> . Please pu	A. Merritt Blvd., le to RHO PSI ALL	Box 1325, Nash UMNI CHAPTER	nville, TN R OF TSUNAA
FOR COMMITTEE USE O	NLY: Date rece	ived Amount received \$_	Check #		