



HEALTH, EDUCATION & ECONOMIC DEVELOPMENT  
13TH BIENNIAL CONFERENCE  
BALTIMORE, MARYLAND  
OCTOBER 3 - 7, 2007  
BWI AIRPORT MARRIOTT HOTEL

# National Coalition of 100 Black Women

## CELEBRATING OUR LEGACY OF LEADERSHIP

### 13<sup>th</sup> Biennial Conference ♦ Baltimore ♦ Maryland

## ad insertion order

Hundreds of women from all over the country will attend the 13th Biennial Conference of the National Coalition of 100 Black Women at the BWI Airport Marriott Hotel in Baltimore, Maryland. This is a wonderful opportunity to promote your business, organization or NCBW chapter to an audience of dynamic and influential women. Please complete this insertion order and submit it, along with payment, laser proof and electronic files as instructed below. You may also make payment online at [www.ncbw.com](http://www.ncbw.com).

**deadline** ALL items must be received by August 31, 2007

**submission** **Please send insertion order, payment and laser proof to:**  
National Coalition of 100 Black Women, Inc.  
1925 Adam C. Powell Jr. Blvd., Suite 1L, New York, NY 10026  
(checks should be made out to NCBW/Community Services Fund)

**Please send electronic files to:**  
The National Coalition of 100 Black Women, Inc.  
Attn.: Shirley L. Poole  
1925 Adam C. Powell Jr. Blvd., Suite 1L, New York, NY 10026  
[nc100bwslp@aol.com](mailto:nc100bwslp@aol.com)

**questions** Contact Shirley L. Poole, 212.222.5660

### ad requirements

- Ads must be black and white
- All ads are full page size
  - With bleed: 8.5"w x 11"h (Live area: 7"w x 9.5"h)
  - Without bleed: 7"w x 9.5"h
- Ads must be submitted in electronic format via e-mail or on CD via mail
- Acceptable file formats include high-resolution (300 dpi) PDF, TIF or JPEG files only
- One ad per insertion order
- Insertion orders must be accompanied by full payment and a laser proof of the ad

### ad rates

Corporate.....	\$2500
Small Business.....	\$750
Women's Organizations and Nonprofits.....	\$250
NCBW Chapter.....	\$175
Add \$25 for photos	

### deadline

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Name of Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Contact E-mail Address \_\_\_\_\_

<b>Space Reservation</b> (check one)	Corporate.....	\$2500
	Small Business.....	\$750
	Women's Organization or Nonprofit.....	\$250
	NCBW Chapter.....	\$175
	Photo included in ad?.....	+\$25

**Method of Payment** Check (payable to NCBW/Community Services Fund)  
 Money Order  
 Credit Card\* (check one: \_\_\_ VISA \_\_\_ MC \_\_\_ AMEX)  
 Exp \_\_\_\_\_  
 \*If name on credit card used for payment is different than name listed on the first line of this form, please write below the signature space the name as it appears on the card.



NCBW  
100

Signature \_\_\_\_\_ Date \_\_\_\_\_