AD AGREEMENT 2026
COMMUNITY COMPASS

Date: _____

Company Name: _____ Contact Name: _____

Phone: _____ Email: _____

Please indicate which type of advertisement you are interested in purchasing and how many issues. If you choose multiple issues, you will be given an opportunity to place a different advertisement design in each issue, if desired.

Community Compass AD RATES

Return signed ad agreement to Chamber Office via **info@portageinchamber.com** or mail to Portage Chamber, 6340 E. Main St. , Suite A, Portage., IN 46368

PREMIUM PLACEMENT
First right of refusal.

	Ad x 1 Issue	Ad x 2 Issues	Ad x 3 Issues
☐ Back Cover (8x10.25)	$2,325	$4,186	$5,930
☐ Inside Front Cover (8x10.25)	$1,875	$3,376	$4,781
☐ Inside Back Cover (8x10.25)	$1,875	$3,376	$4,781
☐ Full Page (8x10.25)	$1,400	$2,520	$3,570

ADDITIONAL ADS
Inside Placement

	Ad x 1 Issue	Ad x 2 Issues	Ad x 3 Issues
☐ 1/2 Page (8x5)	$825	$1,486	$2,104
☐ 1/4 Page (3.875x5)	$550	$990	$1,403
☐ 1/8 Page (3.875x2.375)	$375	$676	$956
☐ Business Boost (1.85x2.375)	$150	$270	$383

Please check which issues to place ad(s):
☐ Summer ☐ Fall ☐ Winter

Community Compass Ad placement not guaranteed. In fairness to all, ads are randomly positioned.

☐ I will submit my digital ready ad to minuteman_press@msn.com
**Ad must be 300 dpi, CMYK, exact size of requested ad space, and should be submitted in a pdf format.*

☐ Ad layout & design requested
**Subject to separate additonal pricing.*

Additional ad design pricing (Check all that apply)
- ☐ Full Page - $125/ad
- ☐ 1/2 Page - $100/ad
- ☐ 1/4 Page - $75/ad
- ☐ 1/8 Page - $50/ad
- ☐ Business Boost- $25/ad

Ad Placement Cost $_____

Ad Design Cost $_____

Total $_____

☐ One Invoice ☐ Invoice Per Issue

Signature: _____

Date: _____

PAYMENT

☐ Check *(PayabletoPortage Chamber of Commerce)* ☐ Invoice ☐ Credit Card *(complete fields below)*

Name on Card: _____ Card #: _____

Exp. Date: _____ Security Code: _____ Billing Phone: _____

Billing Address: _____

This ad contract authorized by: Client name (please print): _____

Signature: _____

Date: _____

Accepted by Chamber Representative

Initials _____ Date _____