Independent Insurance Agents and Brokers of Arizona



Independent Insurance Agent 2018 MEMBERSHIP DIRECTORY **ADVERTISEMENTS**

TO: IIA	IIAB of Arizona Members & Arizona Associate Members								
FROM: Te	Terri S. Edwards, CIC, CISR — Assistant Vice President								
Directory is	n Januar	y 2018. To help	ts and Brokers of offset publicatio peneficial results	on costs, we					
insurance	agencie:	s and compan	Members and A ies. This is an exc es throughout Ari	cellent opp				O	
your adve	rtisement <u>@gmail.c</u>	t in pdf, jpg, ep c <u>om</u> . Please as	no later than De s, Publisher, or W k for a reply verii	ord file to	<u>erri@iiabaz</u>	<u>.com</u> with o	a copy to		
Advertisen tear sheet		ould be submitt	ed in full color. E	Bleeds or cr	ops are no	necessary	. We do not hav	⁄e	
IIABAZ and	d mailed	to 333 E. Flowe	rhe advertiseme r Street, Phoenix ents. We accept	, AZ 85012 -	Attention 1	erri Edward	ds or you may us	e the	
The Direct	ory will be	e 8 1/2" x 11" P	ORTRAIT and co	sts for adve	ertising will b	e as follow	s:		
1 page = 7	1/2" x 10	'' - \$475.00	1/2 page = 7 1/2	1/2 page = 7 1/2" x 4 1/2" - \$375.00			1/3 page = 7 1/2" x 3" - \$325.00		
Your Supp	ort of the	Association is	appreciated.						
If you have	e any que	estions, please	contact me.						
			CREDIT CARI	D PAYMENT	FORM				
☐ AMERICAN	I EXPRESS	□ DISCOVER	☐ MASTERCARD	□ VISA	\$		amount to char	ge	
Card No:			Exp Date:				Security Code:		
Name on car	d:			Signature:					
Card Billing A	ddress (w/C	city/St/Zip):							
Company Na	me:			Phone:					

Return completed form in the mail to 333 East Flower Street, Phoenix, Arizona 85012 OR Email terri@iiabaz.com OR Fax (602) 468-1392.

Receipt emailed: \square YES \square NO