



**TENNESSEE BANKERS**  
ASSOCIATION *Service Since 1890™*

# BANKERS DIRECTORY

2008 SPRING EDITION

## Advertising Request Form

*Communicate your company's products and services to the bankers of Tennessee*

This business-to-business referral directory provides detailed information on all Tennessee banks, thrifts, and trust companies, including address, telephone and fax numbers, primary officers, call report data, and more. The directory also includes listing of state and federal regulatory agencies, state and federal legislative delegations, association officers, committees, staff, and associate members.

**Ad Specifications:** Twelve spaces are available - inside front cover, inside back cover, or each side of five divider tabs. We require 4-color for the cover ads. Electronic files required. We prefer high resolution PDF – minimum 300 resolution and 150-line screen – or EPS files. All 4-color ads must be supplied in CMYK format. Additional charges apply if TBA must make alterations.

### Check Ad Type:

We will make every effort to honor special requests for specific tab and cover positions, but these are on a first-come, first-served basis. If your choice is already committed to another advertiser, we will discuss placement with you at that point.

- Tab/divider page B&W ( 3 x 8 inches ) ..... \$600
  - TBA tab
  - Major Banking Assoc/Reg Agencies tab
  - Government/County Clerks & Map tab
  - Endorsed Products/Associate Members tab
  - Financial Institutions tab
- Front Inside Cover CMYK ( 4 x 8 inches ) .....\$1,800
- Back Inside Cover CMYK ( 4 x 8 inches ) .....\$1,800

**TOTAL ENCLOSED \$** \_\_\_\_\_

Method of payment  VISA  MasterCard  Check

CK# \_\_\_\_\_ (Make checks payable to Tennessee Bankers Association)

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_

Name as appears on card (please print) \_\_\_\_\_

Card billing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature of cardholder \_\_\_\_\_

**Payment & Deadline:** Payment and ad must be received by Feb 22, 2008. Copy will be printed exactly as submitted.

Participation in TBA programs is limited to members, associate members, and nonmembers from an eligible membership category.

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

Contact Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Please return form, ad, and payment by **February 22, 2008**, to:



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### Tennessee Bankers Association

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