

CLASSIFIED ADS & SHORT-TERM SERVICES EXCHANGE

CLASSIFIED ADS

- Advertisement form and copy must be received by 10:00 am Thursday for Friday posting. Copy may be sent via email (preferred method)
- Advertisements will read as submitted
- Contact information must be included in each advertisement
- Payment in full by credit card, check or cash must be received with copy
- Advertisements will run for 4 weeks
- Cost for 50 words or less:
 - Members - \$50 per insertion
 - Non-members - \$80 per insertion
- Each additional word will be at a cost of:
 - Members - \$1 per word
 - Non-members - \$1.60 per word

To place a classified ad, download and complete the classified advertisement form, and send it with payment to: AIA Connecticut, Attn: Allecia Browning, 370 James Street, Suite 402, New Haven, CT 06513; fax: 203-562-5378; email to abrowning@aiact.org.

SHORT-TERM SERVICES EXCHANGE REQUEST (MEMBERS ONLY)

AIA Connecticut member firms in need of short-term assistance may place an ad in the Services section for a prepaid fee of \$25 made by credit card. Requests will be posted on the AIA Connecticut website for only one week. The requesting firm is responsible for contacting those who respond.

The posted information will include:

- Firm town
- Firm county
- Location of project
- Type of experience needed
- Expected duration of commitment

To place an ad for Short-Term Services Exchange, download and complete the Short-Term Services Exchange Request form and send with credit card payment information via email to abrowning@aiact.org by Thursday at 10:00 am for Friday posting. Interested AIA Connecticut members will have one week to respond via email to abrowning@aiact.org with:

- Contact information
- Qualifications
- The period of time in which you are available

At the end of that week period, information received will be forwarded to the firm making the request. Responses received after the one-week period will not be forwarded. Respondents will be contacted directly by the requesting firm.

CLASSIFIED ADS FORM

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Contact info to be listed:

Contact Information:

Name _____ Firm Name _____

Address _____

City/State/Zip _____

Phone _____ Fax _____ Email _____

AIA Connecticut member

Allied member

Payment Options:

A check for \$ _____ made payable to AIA Connecticut is enclosed

Please charge \$ _____ to my: Visa Master Card AMEX

Card # _____ Exp. Date ____/____ Security Code: _____

Name on Card _____

Card Address (include zip): _____

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