

Circulation: 3,201

## 2019 CLASSIFIED ADVERTISING RATES & INSERTION ORDER

TO: \_\_\_\_\_

FROM: Monica Griffiths  
 Pharmaceutical Media  
 30 East 33rd Street, New York, NY 10016  
 Tel: (212) 904-0362 | Email: mgriffiths@pminy.com

COMPANY: \_\_\_\_\_

### PAGE SIZES:

	Width	Height
<input type="checkbox"/> Full Page	7"	10"
<input type="checkbox"/> 1/2 Page Horizontal	7"	5"
<input type="checkbox"/> 1/2 Page Vertical	3.5"	10"
<input type="checkbox"/> 1/4 Page	3.5"	5"

**CLOSING DATE:**  
 One month prior to issue date

### RATES & FREQUENCY DISCOUNTS (PER MONTH):

Desired Frequency	1x	6x	12x
<input type="checkbox"/> Full Page	\$2,250	\$2,220	\$2,140
<input type="checkbox"/> 1/2 Page	\$1,735	\$1,670	\$1,625
<input type="checkbox"/> 1/4 Page	\$920	\$910	\$900

### COST:

\_\_\_\_ X Rate = \$ \_\_\_\_\_  
 Color Charge = \$ \_\_\_\_\_  
 4- color (\$2,100)  
 Agency Discount = \$ \_\_\_\_\_  
 Total NET Cost PER MONTH = \$ \_\_\_\_\_

### 2019 ISSUES:

- |                              |                              |                              |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> Jan | <input type="checkbox"/> Apr | <input type="checkbox"/> Jul | <input type="checkbox"/> Oct |
| <input type="checkbox"/> Feb | <input type="checkbox"/> May | <input type="checkbox"/> Aug | <input type="checkbox"/> Nov |
| <input type="checkbox"/> Mar | <input type="checkbox"/> Jun | <input type="checkbox"/> Sep | <input type="checkbox"/> Dec |

### PLEASE FILL OUT BILLING INFORMATION BELOW:

\_\_\_\_\_  
 Billing Contact (if different from above) PO# (if applicable)

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

\_\_\_\_\_  
 Street Suite#

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

\_\_\_\_\_  
 Phone Fax Email

Please submit your ad via email in a Word-friendly format. If you approve the cost of this ad and the indicated run dates, please sign below and email to Monica Griffiths: mgriffiths@pminy.com.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date