



**2019 CLASSIFIED ADVERTISING RATES & INSERTION ORDER**

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

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

FAX: \_\_\_\_\_

FROM: Mike Perlowitz  
Pharmaceutical Media  
30 East 33rd Street, New York, NY 10016  
Tel: (212) 904-0374 | Email: mperlowitz@pminy.com

**RATES (PER MONTH):**

Size	Dimensions width & height	Price		
		1x	3x	6x
<input type="checkbox"/> Full Page	7" x 10"	\$1,300	\$1,250	\$1,225
<input type="checkbox"/> 1/2 Page (V)	3" x 5"	\$1,025	\$1,000	\$ 975
<input type="checkbox"/> 1/2 Page (H)	7" x 5"	\$1,025	\$1,000	\$ 975
<input type="checkbox"/> 1/4 Page	3.5" x 5"	\$ 825	\$ 800	\$ 775

**CLOSING DATES AND AD SPACE RESERVATION:**

For ad space reservations deadlines for all issues, please contact Mike Perlowitz at the number above.

**2019 ISSUES:**

- Jan
- Apr
- Jul
- Oct
- Feb
- May
- Aug
- Nov
- Mar
- Jun
- Sep
- Dec

- NEW AD
- EXISTING AD

Please review the attached ad, cost, and run schedule and advise of any changes/corrections that you may have. If you approve the ad as set, the cost (per month), and the indicated run dates, please sign and send back.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ADVERTISING INCENTIVES:**

- Both Pubs Combo: 20% Discount = \_\_\_\_\_
- Buy Three & Get One Free  
Free Month = \_\_\_\_\_

**RATES & COST:**

Base Rate = \_\_\_\_\_

Color Charge = \_\_\_\_\_  
 4-color (\$1,600)

Agency Discount:  15% = \_\_\_\_\_

**TOTAL COST PER MONTH =** \_\_\_\_\_

**PLEASE FILL OUT BILLING INFORMATION BELOW:**

Advertising Contact \_\_\_\_\_ Agency Name (if applicable) \_\_\_\_\_

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

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

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

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