

OSMA DIRECTORY OF PHYSICIAN MEMBERS

Are you looking for a cost-effective way to reach physicians that will last all year? Production is underway on the 2010 edition of the Oklahoma State Medical Association Directory of Physician Members, which lists all of our members, their specialties, addresses, telephone numbers, fax numbers, email addresses, and other pertinent information. The directory is given to some 5,000+ physicians and distributed to several thousand others involved in health care and related businesses.

The Directory's advertising rates offer a very cost-effective way for you to reach Oklahoma physicians while showing your support for the Oklahoma State Medical Association. Each advertiser receives one complimentary copy of the directory. Also, one complimentary copy of the Directory will be provided to the advertising agency of record, if applicable.

The contract deadline and artwork deadline for advertising in the OSMA Directory of Physician Members is December 30, 2009.

An Advertising Agreement outlining the rates and sizes for the ads is enclosed. In the event you are a new advertiser or are out of state, payment in full is requested with your agreement.

Please call Stacie Sawwell at (405) 601-9571 if you would like more information or need any other details regarding Directory of Physician Members advertising.

The OSMA Directory of Physician Members is an annual publication. Don't miss this opportunity to be a part of it!

See advertising agreement form for ad specifications.

ADVERTISING AGREEMENT

We, the undersigned, hereby purchase from the Oklahoma State Medical Association, display advertising space, as indicated below, in the 2010 edition of the OSMA Directory of Physician Members.

We agree to purchase _____ page(s) of display advertising.

Black and White Rates:

Full Page: \$600 ½ Page: \$450 1/4 Page: \$350 Business Card: \$200

Four-Color Rates:

Full Page: \$800 ½ Page: \$650

Premium Locations:

Four-Color premium advertising locations are:

Inside Front Cover: \$1,000
Page One: \$1,000 (Opposite inside front cover)
Inside Back Cover: \$1,000
Back Page: \$1,000 (Opposite inside back cover)
Tab Page: \$1,250 (3 available)

All prices are net.

Specifications:

Full Page - Trim Size: 8 ½" x 11"
Full Page - Bleed Size: 8 ¾" x 11 ¼"
Full Page - Live Image: 7" x 10"
½ Page: 7" x 4 ½"
1/4 Page: 3 ¼" x 4 ½"
Business Card: 3 ½" x 2"

It is agreed:

1. Terms: **This agreement must be received by the OSMA on or before December 30, 2009.** Statements will be mailed prior to production and payment is due with the ad artwork or November 30th. All checks should be made payable to the Oklahoma State Medical Association. All the above-mentioned rates are "net" to the OSMA.
2. "Camera-ready" advertising copy and illustrations must be received by the Oklahoma State Medical Association prior to the closing date of **December 30, 2009.** The prices quoted in this Agreement are for camera ready to be presented to the printer for reproduction. (All photographs must be originals). In the event your copy is not "camera-ready", there will be an additional charge for its preparation. However, you will be notified before any additional charges are incurred.
If applicable, pick up last year's ad? Yes No
3. Digital files should be supplied whenever possible. Files must be supplied on CD-Rom or emailed. When emailing files use a compression software to avoid corruption. We will only accept high resolution pdf files or files created in Adobe Pagemaker, Adobe Indesign, Adobe Photoshop or a PDF file. All files must be prepared as CMYK with a resolution of 300 dpi with all font embedded. A high quality digital proof must accompany all files and must be generated from the file submitted, whether submitted on film or digital.
E-mail digital files to: sawwell@okmed.org
Send CD Rom to address listed below.
4. Offset printing process will be used, so original artwork or glossy photos are required for illustration purposes.
5. All advertising is subject to the publisher's approval.
6. One complimentary copy of the Directory of Physician Members will be supplied to each advertiser and, if applicable, one complimentary copy will be provided to the advertising agency of record.

ACCEPTED:

Advertiser's Name: _____

Contact Name: _____

Email: _____

Contact's Phone: _____

Address: _____

City _____ State _____ Zip Code _____

Authorized Signature: _____

Agency's Name: _____

Agency's Contact: _____

Agency's Address: _____

City _____ State _____ Zip Code _____

Authorized Signature: _____



Please complete form and return by fax or mail to:
Oklahoma State Medical Association
313 N.E. 50th
Oklahoma City, OK 73105
Fax: (405) 601-9575

The Oklahoma State Medical Association reserves the right to refuse any advertising.