

# 2017 DIRECTORY OF PHYSICIAN MEMBERS

Be seen in the Oklahoma State Medical Association's 2017 Member Directory

- 3,000+ printed & distributed to physician offices
- Online 24/7/365
- Member listings include specialty, address and phone number

Advertisers (& their ad agencies) receive a COMPLIMENTARY COPY of the directory.

There's no more **cost effective** way to reach Oklahoma physicians & their staffs while **showing your support for the state's largest professional association for physicians.**

Reserve your spot by emailing the form below to Stacie Sawvell, Publications Manager, at sawvell@okmed.org with payment & artwork by Tuesday, November 22, 2016. Questions? Call Stacie at 405-601-9571, x110.



## ADVERTISING AGREEMENT

### Rates & Specifications

Black and White Rates:

Full Page: \$625

1/2 Page: \$475

1/4 Page: \$375

Business Card: \$225

Four-Color Rates:

Full Page: \$825

1/2 Page: \$675

Four-Color Premium Rates:

Inside Front Cover: \$1,000

Inside Back Cover: \$1,000

Back Page: \$1,000

(Opposite inside back cover)

(4) Tab Page(s): \$1,250

(Front/Back and Front/Back)

All prices are net.

Specifications:

Full Page - Trim Size: 8 1/2" x 11"

Full Page - Bleed Size: 8 3/4" x 11 1/4"

Full Page - Live Image: 7" x 10"

1/2 Page: 7" x 4 1/2"

1/4 Page: 3 1/4" x 4 1/2"

Business Card: 3 1/2" x 2"

Run last used ad

We, the undersigned, hereby purchase from the Oklahoma State Medical Association, display advertising space, as indicated below, in the 2017 edition of the OSMA Directory of Physician Members.

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: \_\_\_\_\_

### Payment Information

• Make check payable to the OSMA. Return to the Oklahoma State Medical Association, 313 Northeast 50th, Oklahoma City, OK 73105

• Complete credit card information & scan to payments@okmed.org or fax to 405-601-9575.

Credit Card:  Visa  Mastercard  Discover  AMEX

Exp Date: \_\_\_\_\_ Card Code (3 digits on back of card) \_\_\_\_\_

Total: \_\_\_\_\_ Signature: \_\_\_\_\_

Name on Card: \_\_\_\_\_

(If using company card, please indicate the company name as well.)

It is agreed:

1. This agreement must be received by the OSMA on or before November 22, 2016. All checks should be made payable to the Oklahoma State Medical Association. Rates are "net" to the OSMA.
2. "Camera-ready" must be received by the Oklahoma State Medical Association prior to the closing date of November 22, 2016. The prices quoted in this Agreement are for camera ready to be presented to the printer for reproduction. If 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.
3. We accept high resolution pdf files or files created in Adobe Indesign, Adobe Photoshop, Adobe Illustrator or a PDF file. All files must be prepared as CMYK with a resolution of 300 dpi with all fonts embedded.
4. All advertising is subject to the publisher's approval. The Oklahoma State Medical Association reserves the right to refuse any advertising.
5. 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.