

VIRGINIA NEWS



PSV MEMBER DISCOUNTED RATES

2016 INSERTION ORDER

Today's Date _____

Requested Publication Issue(s): May 2016 August 2016 December 2016

The deadlines for advertising materials are the following: **May issue** - April 1; **August issue** - July 1; **December Issue** - November 1
 Due to space constraints, ads are accepted on a first-come, first-served basis. Please submit this completed and signed insertion order as as soon as possible to assure your selected advertising space. All ads should be produced as black and white or grayscale only and provided as high resolution Adobe .pdf files to Beverly Bernard via email at beverly@societyhq.com. Ad production services are available for an additional fee of \$110 per hour.

- PLEASE PRINT -

Advertiser _____
 Billing Client _____ Contact Person _____
 Billing Address _____
 City/State/Zip _____
 Email Address _____ Phone _____ Fax _____
 Headline _____
 Authorized Signature _____

Discounted Rates for PSV Members

If you reserve ad space in all three issues of the *PSV Newsletter*, there is a 25% discount per issue.

FULL SIZE	HALF SIZE	QUARTER SIZE
<input type="checkbox"/> 1x rate - \$850 <input type="checkbox"/> 3x rate - \$637 each	<input type="checkbox"/> 1x rate - \$450 <input type="checkbox"/> 3x rate - \$337 each	<input type="checkbox"/> 1x rate - \$250 <input type="checkbox"/> 3x rate - \$187 each
Size: 750 px x 400 px horizontal	Size: 400 px x 200 px horizontal	Size: 200 px x 200 px

Total Amount Due \$ _____ P.O. / Insertion Number (if applicable): _____

At the time of publication, your invoice will be issued. Payment is due within 15 days of invoicing or you may prepay for your ad. You will receive two printed copies of the newsletter for your records.

Invoice me Payment with Credit Card

Special Instructions: _____

Method of Payment: Check VISA MasterCard American Express

Card No: _____ Exp. Date _____ CVV Security Code* _____

Signature _____ Printed Name on Card _____

*CVV code is the three digit number on the back of VISA or MC or 4 digit number on the front of AMEX card above the account number.

For payment by check, please make payable to **PSVA** and mail to:

Psychiatric Society of Virginia • 2209 Dickens Road • Richmond, VA 23230-2005

Phone (804) 565-6321 • Fax signed and completed form to: (804) 282-0090 • Email: beverly@societyhq.com

Fax Completed and Signed Insertion Order to (804) 282-0090