PSYCHIATRIC SOCIETY OF VIRGINIA

VIRGINIA NEWS



ADVERTISING RATES

INSERTION ORDER

| ☐ Spring (April) ☐ S | ole to assure your selected advertising space | ner issue - May 1; Fall issue - August 1; -served basis. Please submit this completed . All ads should be produced as RGB or In- |
|------------------------------------|--|--|
| Advertiser | ד | oday's Date |
| | Contact Person | |
| Billing Address | | |
| City/State/Zip | | |
| Email Address | | Fax |
| Headline | | |
| Authorized Signature | | |
| Requested URL link | | |
| If you reserve ad space in all fou | ur issues of the PSV Newsletter, there | is a 25% discount per issue. |
| Total Amount Due \$ | P.O. / Insertion Number (if applical | ole): |
| FULL SIZE | HALF SIZE | QUARTER SIZE |
| ☐ 1x rate - \$850 | ☐ 1x rate - \$450 | ☐ 1x rate - \$250 |
| ☐ 4x rate - \$637 each | ☐ 4x rate - \$337 each | ☐ 4x rate - \$187 each |
| Size: 750 px x 400 px horizontal | Size: 400 px x 200 px horizontal | Size: 200 px x 200 px |
| or you may prepay for your ad. Yo | r invoice will be issued. Payment is due vou will receive a link to the newsletter alor me Payment with Credit Card | |
| Special Instructions: | | |
| Method of Payment: | eck USA 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

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