

NEW JERSEY HEALTH VIEW MAGAZINE

NJV PUBLISHING
 1812 Front St., Ste. 1-CF
 Scotch Plains, NJ 07076
 Ph: (908) 663-2188
 Fax: (908) 317-8311

2010 DR. REFERENCE GUIDE

AD CONTRACT

You are hereby authorized, for the issues indicated below, to publish in Health View 2010 Dr. Reference Guide the display advertising of : _____ (Name of Advertiser)

Name _____ Practice Name _____
 Office Manager Name _____
 Address _____ City/State/Zip _____
 Phone _____ Fax _____ Email _____

CREDIT CARD INFORMATION

VISA MASTERCARD AMEX

Name on Card _____
 Credit Card # _____ Exp. Date _____ Security Code _____

I would like to be listed under the following category(s).
 (Please choose up to two. (2):

I am: Existing Advertiser New Advertiser

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Anesthesiology | <input type="checkbox"/> Cardiology | <input type="checkbox"/> Dentistry | <input type="checkbox"/> Dermatology |
| <input type="checkbox"/> Emergency Medicine | <input type="checkbox"/> Endocrinology | <input type="checkbox"/> Family Medicine | <input type="checkbox"/> Gastroenterology |
| <input type="checkbox"/> Infectious Diseases | <input type="checkbox"/> Internal Medicine | <input type="checkbox"/> Nephrology | <input type="checkbox"/> Neuroscience |
| <input type="checkbox"/> Nutritional Medicine | <input type="checkbox"/> Obstetrics / Gynecology | <input type="checkbox"/> Oncology / Hematology | <input type="checkbox"/> Pathology |
| <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Psychiatry | <input type="checkbox"/> Pulmonology | <input type="checkbox"/> Radiology |
| <input type="checkbox"/> Rehabilitative Medicine | <input type="checkbox"/> Rheumatology | <input type="checkbox"/> Senior Living | <input type="checkbox"/> Surgery |

COVER ADS

Back Cover (Full Page) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 Inside Front Cover (Full Page) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 Inside Back Cover (Full Page) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____

PREMIUM PLACEMENT IN THE 2010 DR REFERENCE GUIDE

Profile of your practice and prominent position near editorial about your specialty.

Banner Profile (Full Page) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 Platinum Profile (2/3 Page) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 Practice Profile (1/2 Page - Horizontal) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____

BASIC ADS & LISTINGS IN THE 2010 DR REFERENCE GUIDE

1/4 Page - Vertical (3.6"w x 4.5"h) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 1/8 - Business Card (3.6"w x 2.125"h) 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 Highlighted Listing 1 Zone 2 Zones 3 Zones @ Ad Rate \$ _____
 Total Cost \$ _____

Signature of Advertiser _____ HEALTH VIEW Account Rep _____

Fax signed contract to: (908) 317-8311 Attn: Advertising Dept.