

## **Advertising Insertion Order**

Date:\_\_\_\_

470 Boston Post Road • Weston, Massachusetts 02493 (781) 899-2702 • Fax: (781) 899-4900 www.disastermedicinejournal.com

Advertiser		
Address		
		Zip/Postal Code
Phone ( )	Fax ( )	
Person authorizing advertising (ple	ease print)	
		_Zip/Postal Code
Phone ( )	Fax ( )	_Email
		□1/3 pg. □(vert) □(horz) □ 1/4 pg.
Contract: ☐ 4 issues ☐ 3 issues	☐ 2 issues ☐ 1 issue Start Issu	ae (Month)
Gross cost \$	Special Issue:	
PRODUCTION		
Special position		
☐ Insert Number of pages	Position	
☐ 2nd cover ☐ Facing page at no	premium, but must run as spread;	
□ 3rd cover □ 4th cover:		
CREDIT REFERENCE (new	account)	
Bank name	Tel. No. (	)
Account #	Person to speak with	
ARTWORK REQUIREMENTS:	◆ Non-Bleed AD DIMENSIONS:	◆ FILM REQUIREMENTS:

**◆ FINISHED TRIM SIZE:** 8-3/8 x 10-7/8

## **◆ BLEED AD DIMENSIONS SIZES:**

(Sizes in Inches)

Full page: 8-5/8 x 11-1/8.

Includes 1/8" trim all sides. Allow 1/2" inset safety for live matter all edges. Fractional units:

1/2 page horizontal: 8-5/8 x 5-9/16 1/2 page vertical: 4-5/16 x 11-1/8

## (Sizes in Inches)

'	
1 page	7 x 10
2/3 page	4-1/2 x 10
1/2 page-vertical	3-3/8 x 10
1/2 page-horizontal	7 x 4-7/8
1/3 page-vertical	2-1/2 x 10
1/3 page-horizontal	4-1/2 x 4-7/8
1/4 page	3-3/8 x 4-7/8

Electronic Files: Color ads must be in CMYK color PDF format. B&W ads must be in B&W PDF format. PDF must be set for hi-res and include tiff preview, all images and fonts. All ads must have register marks, center marks, and trim marks clearly indicated. Color ads require a Matchprint or similar. Artwork without color proof runs at advertiser's risk.