

# CORRDOCS

## The NEWSLETTER OF THE AMERICAN COLLEGE OF CORRECTIONAL PHYSICIANS

### 2019 Advertising Rates and Mechanical Specifications:

#### Publishing Office:

For contracts, insertion orders, or correspondence, please contact:

American College of Correctional Physicians

5404 South Taft Court

Littleton, Colorado 80127

Phone: 720-646-2978

Fax: 303-988-2956

Email: christine@accpmed.org

#### Circulation:

ACCP Members only and posted on our website in the member's only section

#### Market Coverage:

National doctors of medicine and osteopath, medical directors, staff physicians, administrators; prison, jail, juvenile and federal facilities; researchers, consultants, industry leaders, website users, and key decision makers.

#### General Information:

Frequency: Quarterly

<u>Issue:</u>	<u>Insertion order due:</u>	<u>Art Due:</u>	<u>Distribution:</u>
Spring 2019	January 31, 2019	February 4, 2019	February
Summer 2019	May 2, 2019	May 6, 2019	May
Fall 2019	August 1, 2019	August 5, 2019	August
Winter 2019	October 31, 2019	November 4, 2019	November

#### Bonus Distribution:

<u>Issue:</u>	2019 NCCHC Spring Conference	April 6 – 9, 2019 Nashville
	2019 NCCHC Fall Conference	October 12-16, 2019 Ft. Lauderdale
	2019 ACCP Fall Conference	10-13-2019 Ft. Lauderdale ( <b>Exhibitors Welcome</b> )

#### Editorial Scope:

Each issue contains feature articles on clinical and administrative topics, industry reviews, news, books reviews, member's news, legal and legislative updates, and information of professional interest.

#### Requirements for Acceptance of Advertising:

- All advertising is subject to approval. Publisher reserves the right to reject any advertising not in keeping with publication's standards.

- In consideration of publication of an advertisement, the advertiser and the agency jointly and severally, will indemnify and hold harmless, ACCP, its officers, agents and employees against expenses (including legal fees) and losses resulting from the publication of the contents of the advertisement, including, without limitation, claims or suits of libel, violation of rights of privacy, copyright infringement or plagiarism.

Policy of Placement of Advertising: Interspersed with editorial

**Advertising Rates:**

	1 AD	2 Ads	3 Ads	4 Ads
Full Page:	\$990/per ad	\$940/per ad	\$890/per ad	\$840/per ad
Half Page:	\$800/per ad	\$760/per ad	\$720/per ad	\$680/per ad
Third Page:	\$600/per ad	\$570/per ad	\$540/per ad	\$510/per ad

**Classified Advertising Rate:**

\$1.25/per word for text Advertising Only (no logos or graphics).

Box your ad with a solid border for additional \$1.00

ACCP reserves the right to change the rates at any time, and to charge a fee to make copy and design changes.

**Earned Rates:**

Earned rates are based on the total number of insertions run within a twelve-month period. Ads need not run in consecutive issues if placing less than 4 ads.

**Color Advertising:**

\$250 for standard color (metallic colors extra, please inquire) in addition to earned black and white rate listed above

**Bleed:** - No charge

**Agency Commission:** Recognized advertising agencies receive a 15% discount on gross billing for display ad space and color if paid within 30 days of invoice date. After 30 days, payment of the non-discounted rate will be required.

**AD Specification:**

Space Sizes:	Width X Height
Final trim size:	8.5" X 11"
Full page:	7.5" X 9.25"

Full page Bleed:	8.75" X 11.25"
Live area:	8" X 10.5"
½ page	7.25" X 4.625"
½ vertical page	4.75" X 7.125"
1/3 page	7.25" X 2.75"
1/3 vertical page	2.25" X 9.25"

- Production by Offset
- Media accepted – CD-ROM or DVD
- Files accepted: Acrobat PDF

Storage: Material held for one year following publication

**Insert Rates:**

2-page insert: 3 times the earned Black and White rate

4- page insert: 5 times the earned Black and White rate

8-page insert: 8 times the earned Black and White rate

Business Reply Cards: earned Black and White rate

**Insert Specifications:**

2-page or larger

    Final trim size no larger than 8.5" X 11"

**BRC:**

Minimum dimensions: 3.5" high, 5" long and .007" thick

Maximum dimensions: 4.25" high, 6" long, .016" thick

**Cancellation Policy:**

Cancellations must be received in writing before insertion order deadline of each issue.

# 2019 CorrDocs Advertising Contract

To reserve ad space, complete the advertising contract and return to: [christine@accpmed.org](mailto:christine@accpmed.org)

Advertising Company \_\_\_\_\_ ADagency: \_\_\_\_\_

Contact \_\_\_\_\_ Title: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Web address \_\_\_\_\_

Product to be advertised \_\_\_\_\_ Ad# \_\_\_\_\_

I agree to the terms and conditions of this contract as described on the preceding page. Authorized signature \_\_\_\_\_ Date: \_\_\_\_\_

## Ad size and frequency

Circle the appropriate rate to indicate the ad space to be reserved and the frequency of insertions. Also indicate color charges, if any.

Black & White Rates	Width x Height (\$250 per)	Color Display Ad Size				
		1x	2x	3x	4x	
Full page	7.25 x 9.25	\$990	\$940	\$890	\$840	_____
Full page bleed	8.75 x 11.25	\$990	\$940	\$890	\$840	_____
1/2 page	7.25 x 4.625	\$800	\$760	\$720	\$680	_____
1/2 vertical	4.75 x 7.125	\$800	\$760	\$720	680	_____
1/3 page	7.25 x 2.75	\$600	570	540	510	_____
1/3 vertical	2.25 x 9.25	\$600	570	540	510	_____
Classified Ads	\$1.25 per word x # of words _____					
	\$ _____			Solid border \$100		Total

## Insertion schedule

Please indicate the issues in which the ad will appear.

Issues	Insertion orders due	Ad copy/art due	Distribution
X Spring 2019	January 31, 2019	February 4, 2019	February
X Summer 2019	May 2, 2019	May 6, 2019	May
X Fall 2019	August 1, 2019	August 5, 2019	August
X Winter 2019	October 31, 2019	November 4, 2019	November

## Payment

Our check payable to American College of Physicians is enclosed.

Please invoice us. (\$30 invoicing fee applies. Purchase order must be enclosed) PO# \_\_\_\_\_

Credit card:       MasterCard       Visa       American Express

Card number

Expiration date

CVS#

Billing address (if different from above)

Authorized signature

Print name

Date

Return to: ACCP, 5404 South Taft Court, Littleton, Colorado 80127, or fax to 303-988-2956, or email to [christine@accpmed.org](mailto:christine@accpmed.org)

---