

Genomics Biotech eNews

The Official Newsletter of the Genomics Biotech Institute

Sponsorship Rates 2009

Banner Ad above Masthead, Lead Page

<u>Quarterly</u>	<u>Semi annual</u>	<u>Annual</u>
\$7,900	\$14,900	\$24,000

Banner Ads

<u>Quarterly</u>	<u>Semi annual</u>	<u>Annual</u>
\$5,900	\$9,750	\$16,000

Logo Image & Text Ads

<u>Quarterly</u>	<u>Semi annual</u>	<u>Annual</u>
\$4,500	\$7,500	\$12,000

Circulation: 15,000

Each issue of the Genomics Biotech eNews:

- Reaches a targeted audience of Plan, Purchaser (Employer), and Provider decision makers; including over 12,000 Medical Directors
- Delivers the most current news from around the world in Genomics, Genetics and Biotechnology, as well as FDA and CMS news

Because we are an electronic mail publication, we deliver your company's ads straight to the desktops of our readers. With the Genomics Biotech eNews, you know that you're reaching your target audience.

For advertising information contact Jeremy Williams at (856) 589-3842 or email him at jwilliams@namcp.org

Mechanical Requirements

Logo or Product / Text Ad

- Ad copy for this format includes your **logo** and **text ad copy**
- Position – Logo appears along side the “Tab” and again, following of articles for specified tab. The latter position of your logo is accompanied by a text message.

Image Ad Copy

- Image size: 120 x 110 pixels
- Logo file size: 60k maximum; .gif or .jpeg;
- Image is “clickable” and links to the same web page as your ad

Text Ad Copy

- Text copy: 300 characters maximum, excluding spaces
- Text includes a link to any page on your web site

Banner Ad

Banner (120k maximum)



- Above the masthead
- Standard graphic banner
- **Banner size:** 680 x 90 pixels
- File: 120k maximum; .gif or .jpeg; no limits on animation
- Banner includes a link to your website or message URL

Insertion Orders and Invoice

Email all Insertion orders to Jeremy Williams at jwilliams@namcp.org

Please sign below as an agreement to sponsorship or forward Insertion Order for Sponsorship

Please select Billing preference:

- Annual, One invoice** **Quarterly, 4 invoices**

Please send invoice to: _____

Company _____

Address _____

City, State, Zip _____

Phone _____

Fax _____

Email _____

Authorized Signature & Title