

# MEDICAL ASSOCIATION OF THE STATE OF ALABAMA

## 2008-2009 Membership Directory

With more than 7,000 members, MASA represents approximately 70 percent of practicing physicians across the state of Alabama. The MASA Directory offers you the opportunity to familiarize the medical community with your organization's services and products. Used on a daily basis by member physicians and their staff, this official directory contains professional information, including telephone numbers and addresses, pertaining to each member.

### Preferred Position Rates

	4-color	B&W
Inside Back Cover	\$3000	\$2300
Opposite Back Inside Cover	\$3000	\$2300
Opposite Table of Contents	\$3000	\$2300

### Premier Run of Book Rates

	4-color	B&W
Full Page	\$1800	\$1200
Half Page	\$1500	\$800
Quarter Page	\$1200	\$500

### Run of Book Rates (Black & White only) Specialty Section/Membership by County Section

Full Page	\$1000
Half Page	\$600
Quarter Page	\$400

### Ad Size/Mechanical Requirements

Full Page	7 1/2" x 10"
1/2 Page Horizontal	7 1/2" x 4 7/8"
1/2 Page Vertical	3 5/8" x 10"
1/4 Page Horizontal	7 1/2" x 2 3/8"
1/4 Page Vertical	3 5/8" x 4 7/8"

### File formats accepted

EPS, TIFF, PDF and Quark Xpress  
300 dpi minimum

**Projected Publication Date: October**

**Ad Reservation Deadline: July 15**

**Ad Copy Deadline: August 15**

Printing is offset from camera-ready artwork, scaled to size. Only good, reproducible proofs, or photographs and artwork with complete layout and keyline to exact dimensions, including mandatory border are acceptable as "camera-ready artwork." Color indication must be specific, or it will be selected by publisher. A border is mandatory on half and quarter page ads, and must not exceed dimensions indicated above. Advertisements may be furnished on disk in QuarkXpress or in EPS, TIFF or PDF file formats with all supporting files and fonts. Advertisements submitted in EPS, TIFF or PDF formats should be set at 300 dpi minimum. Please include a laser proof of the advertisement to be placed if sending a file on disk.

Participating advertisers receive a complimentary copy of The Medical Association of the State of Alabama directory (a \$135 value).  
NOTE: MASA reserves the right to decline, withdraw or modify advertisements at its discretion.

### FOR MORE INFORMATION PLEASE CONTACT:

Medical Association of the State of Alabama • Salina Frazee • P.O. Box 1900 • Montgomery, AL 36102  
Phone 334.593.5325/334.202.4279 • Fax 866.291.3559 • masarosteradvertising@charter.net

**MEDICAL ASSOCIATION  
OF THE STATE OF ALABAMA**

**2008-2009 Membership Directory**

**ADVERTISING RESERVATION FORM**

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**Preferred Position**

- |                            |                                  |                              |
|----------------------------|----------------------------------|------------------------------|
| Inside Back Cover          | <input type="checkbox"/> 4-color | <input type="checkbox"/> B&W |
| Opposite Back Inside Cover | <input type="checkbox"/> 4-color | <input type="checkbox"/> B&W |
| Opposite Table of Contents | <input type="checkbox"/> 4-color | <input type="checkbox"/> B&W |

**Premiere Run of Book**

- |              |                                     |                                   |
|--------------|-------------------------------------|-----------------------------------|
| Full Page    | <input type="checkbox"/> 4-color    | <input type="checkbox"/> B&W      |
| Half Page    | <input type="checkbox"/> 4-color    | <input type="checkbox"/> B&W      |
| Quarter Page | <input type="checkbox"/> 4-color    | <input type="checkbox"/> B&W      |
|              | <input type="checkbox"/> Horizontal | <input type="checkbox"/> Vertical |

**Run of Book**

- Full Page
- Half Page
- Quarter Page
- Horizontal     Vertical

**Section**

- Specialty
- Membership by County

Reservations for ads in the  
2008-2009 Membership Directory  
must be received by **Tuesday, July 15**,  
to ensure optimum placement.

Ads for the Directory must be received  
by **Friday, August 15**.

Signed \_\_\_\_\_

Date \_\_\_\_\_

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**Submit ads to:**

Medical Association of the State of Alabama  
ATTN: Salina Frazee  
Post Office Box 1900  
Montgomery, Alabama 36102  
Fax 866.291.3559  
masarosteradvertising@charter.net

**For office use only:**

Ad description

Ad cost	Discount	Amount to be charged

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