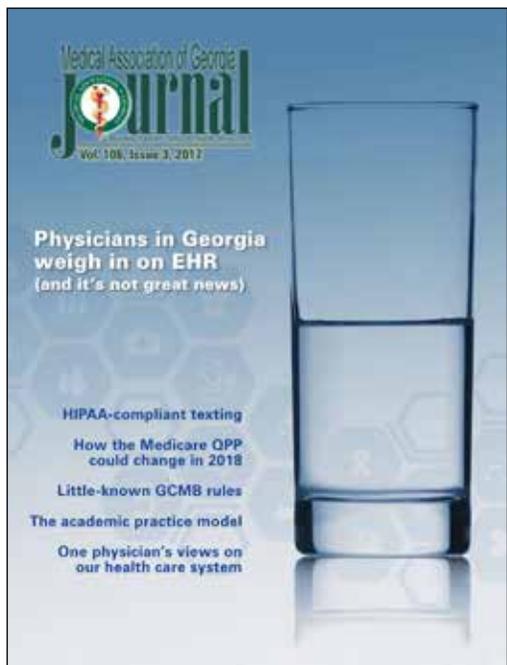


MEDICAL ASSOCIATION OF GEORGIA JOURNAL

2018 ADVERTISING RATES

Reach thousands of physicians across specialties in Georgia



About MAG

With more than 7,800 members, MAG is the leading voice for the medical profession in Georgia – which includes physicians in every specialty and every practice setting. MAG membership has increased by more than 35 percent since 2010. Go to www.mag.org for additional information.

Advertising with MAG

The *Journal of the Medical Association of Georgia* is a quarterly, four-color magazine that's focused on the business and the practice of medicine.

Georgia physicians want state-specific news about medical economics, law, public health, and legislation in their publications. The *Journal* covers these topics in depth – and it reaches thousands of physicians across specialties in Georgia.

Format

8 1/4" W x 10 7/8" H, four-color process throughout

Advertising Rates (per issue)

	1-2 Issues	3-4 Issues
Premium Positions - Four-Color Only		
Back Cover	\$2,750	\$2,615
Inside Front Cover	\$2,250	\$2,135
Inside Back Cover	\$2,250	\$2,135
Page One	\$2,250	\$2,135
Four-Color		
Full Page	\$1,825	\$1,705
1/2 Page	\$1,250	\$1,190
1/4 Page	\$850	\$800
Black & White		
Full Page	\$1,450	\$1,375
1/2 Page	\$900	\$855
1/4 Page	\$550	\$520
Supplier Services		
Basic Listing	\$100	
Enhanced Listing (includes 25-word description)	\$150	

Advertorials (subject to MAG approval)

One-page article (750 words) plus full-page color ad \$2,500/issue
Two-page article (1,500 words) plus full-page color ad \$3,500/issue



Medical Association of Georgia

1849 The Exchange, Suite 200
Atlanta, Georgia 30339
678.303.9290
678.303.3732 fax
www.mag.org



PubMan, Inc. • 180 Interstate North Parkway • Suite 150 • Atlanta, Georgia 30339
For information regarding advertising, please call: 404.255.5603 • 800.875.0778 • Fax: 404.255.0212

MEDICAL ASSOCIATION OF GEORGIA JOURNAL

2018 ADVERTISING SPECS

PAGE SIZE	WIDTH	X	HEIGHT
Full Page			
Non-Bleed (Live-Area)	7"		10"
Trim	8 ¹ / ₄ "		10 ⁷ / ₈ "
Bleed	8 ¹ / ₂ "		11 ¹ / ₈ "
Half Page, Horizontal	7"		4 ³ / ₄ "
Quarter Page	3 ³ / ₈ "		4 ³ / ₄ "

Publication Calendar

Issue	One	Two	Three	Four
Topic	Practice Management	National Health Care	Technology/ Education	HOD (2017)/ State Legislative Preview (2018)
Ad Closing	March 2	June 1	Sept. 3	Dec. 7
Publication Date	March 23	June 22	Sept. 21	Dec. 28

Production Requirements

Rates are based on advertiser providing a digital Quark, Illustrator, Photoshop, InDesign or high-resolution PDF file (300 dpi). Please include all fonts and support files. Ads should be e-mailed to gthurow@pubman.net or mailed to PubMan, Inc. - 180 Interstate North Parkway, Suite 150, Atlanta, Georgia 30339.

Production Services: The following services are available at a reasonable charge: graphic design, typesetting, photography, or image retouching. Ads that require typesetting must be submitted within 10 days of the terms of the advertising agreement or upon the agreement if less than 10 days before closing. Please consult with your account executive for current prices and details.

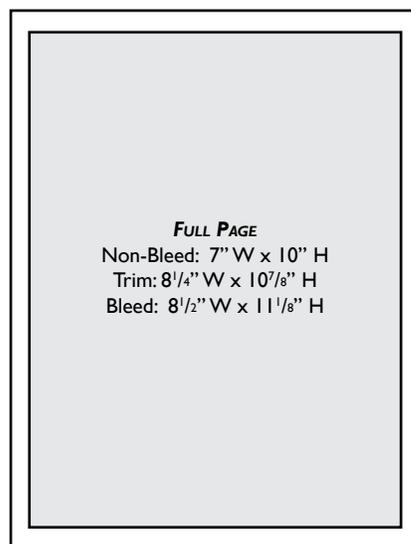
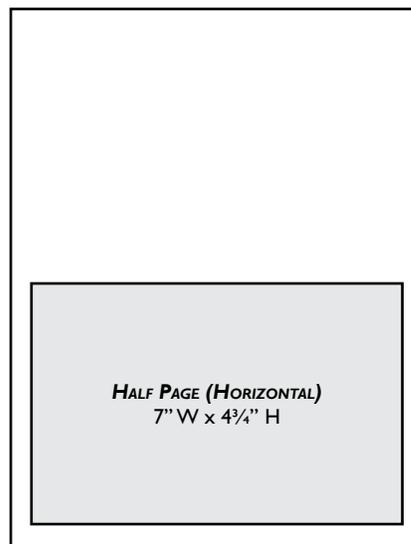
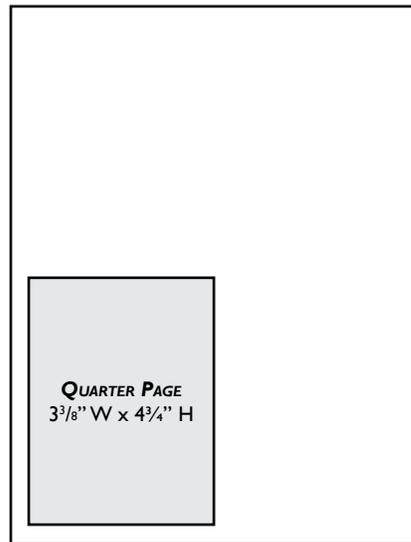
Ad Alterations and Copy Changes: All copy changes must be made in writing or via fax and submitted before deadline. No copy corrections will be accepted verbally. Advertiser and/or agency assumes risk for errors. PubMan, Inc., will make a good faith effort, but it cannot assume liability for errors or copy changes.

Materials: Any material not requested to be returned will be archived and stored as a convenience to advertisers; publisher assumes no liability for the safekeeping of materials.

Compliance with Specifications: Ads that do not meet the proper size specifications will be handled as follows: Ads smaller than specified will be centered in the space. Ads larger than specified may, at the publisher's option, be returned to the advertiser or reduced to fit the proper space; additional production charges may be incurred.

Terms

- ◆ Rates are based on digital file furnished by advertiser. Production services are available for an additional fee.
- ◆ Space is limited and available on a first-come, first-served basis. Placement is at the discretion of the publisher unless the advertiser has contracted for a premium position.
- ◆ 25 percent due with signed contract. Balance due upon delivery. Make checks payable to **PubMan, Inc.**



Contact Brian Botkin for
advertising information at
404.255.6617 or bbotkin@pubman.net

MAG ADVERTISING TERMS AND CONDITIONS

This agreement, which includes "Advertising with MAG," is made and entered into by and between the Medical Association of Georgia and any of its subsidiaries and affiliates, now formed and/or formed at any future time, collectively as party of the first part (herein referred to as "MAG") and _____ and its subsidiaries and affiliates, now formed and/or formed at any future time, collectively as party of the second part (herein referred to as "Advertiser").

- 1. Advertisements:** MAG reserves the right to approve content of all ads. MAG retains all ownership and reproduction rights to advertisers and/or artwork that appear in MAG communications. Duplication of advertisements and/or artwork that appear in MAG communications without payment for additional reproduction rights can result in substantial civil liabilities. MAG will not accept advertisements for insurance products. All advertisements are subject to review by MAG legal counsel.
- 2. Termination:** In the event of a material breach of the terms of this Agreement by Advertiser, MAG may terminate this Agreement immediately without liability and Advertiser's advertisements will cease to be published in the electronic News from MAG/www.mag.org/Journal. In the event of termination, Advertiser shall remain liable for any amounts due under the Agreement and such obligation to pay shall survive any termination of this agreement.
- 3. Assignment:** This agreement shall not be assigned by either party without the prior written consent of the other party. Any purported assignment without such consent shall be null and void.
- 4. Relationship:** The parties hereto agree that during the term of this Agreement, they shall at all times be considered independent contractors with respect to each other. The parties further agree that this Agreement is not intended to create any benefit or right of enforceability for or on behalf of any person other than the parties hereto.
- 5. Severability:** If any provision of this Agreement or its application shall be contrary to the law or public policy, the remaining provisions shall continue in full force and effect.
- 6. Governing Law:** This Agreement shall be governed by and construed in accordance with the laws of the State of Georgia.
- 7. Venue:** The parties agree for purposes of venue this Agreement was entered in Cobb County, Georgia, and for any suit arising from this Agreement, for enforcement and/or damages for breach or violation hereof, venue shall be in the proper courts of Cobb County Georgia only, to the exclusion of all other courts in any other venue.
- 8. Interest on Delinquency:** Any monies owed in excess of thirty (30) days may be deemed to be delinquent by the Medical Association of Georgia. Interest at the rate of one percent (1%) per month may be applied on any amounts deemed to be delinquent by the Medical Association of Georgia under this Agreement and/or the "Advertising Contract."
- 9. Miscellaneous:** The waiver of any breach or default of this Agreement shall not constitute a waiver of any subsequent breach or default, and shall not act to amend or negate the rights of the waiving party. This Agreement may be amended only by a writing executed by a duly authorized representative of each party. Advertiser agrees that in the event MAG shall retain legal counsel to enforce its rights under this Agreement, MAG shall be entitled to recover from Advertiser in addition to any other sums due, the reasonable attorney fees and interest on monies owed.

Medical Association of Georgia Advertiser:

Name _____
Company _____
Signature _____
Date _____

Medical Association of Georgia Representative:

Name _____
Title _____
Signature _____
Date _____

