

Custom 3-Panel, 8 1/2" x 11" Brochures

Design Fee: \$999.00. The minimum order is 2,000 brochures.

These brochures may be combined with other MJD Procedure Brochures for reduced pricing.

2,000 - 2,999 brochures - \$.79 each, 3,000 - 4,999 brochures - \$.69 each, 5,000 - 9,999 brochures - \$.59 each, 10,000 + \$.49 each

Custom 2-Page or 4-Page Full-Color Newsletters

Stimulate interest in your practice!

Let MJD write, design, print and mail your next magazine-quality patient newsletter.

Our design fees include the use of our professionally written articles, fluff photos and before and after photos.

Design Fee: \$999.00 for a 2-page newsletter and \$1,599.00 for a 4-page newsletter.

Additional editing fees may be charged after 2nd draft. Editing \$50.00 per half hour.

How do you get started? Submit your order form and we will fax you our list of articles. Select up to ten articles and we will fax them for your review. You may edit them to reflect your practice, include your own articles, provide a personal column, or a "Call to Action" coupon if you like. Return these to us and within 72 hours, we will send you a color PDF of your newsletter for proofing. Once you approve it, you're done. We print it and mail it. ***It's that simple!***

2-page Printing fee:

1,000 newsletters --- **\$960.00** / \$0.96 each
 2,500 newsletters --- **\$1,200.00** / \$0.48 each
 5,000 newsletters --- **\$1,500.00** / \$0.30 each
 10,000 newsletters --- **\$2,200.00** / \$0.22 each
 20,000 newsletters --- **\$3,600.00** / \$0.18 each

4-page Printing fee:

2,500 newsletters --- **\$1,625.00** / \$0.65 each
 5,000 newsletters --- **\$2,250.00** / \$0.45 each
 10,000 newsletters --- **\$3,500.00** / \$0.35 each
 20,000 newsletters --- **\$5,200.00** / \$0.26 each

We write it... print it... mail it... and you see more patients!

Mailing Service: \$.48 per newsletter.

Includes: De-duping your address list, USPS updating, labeling, delivery to post office and 3rd class postage.

Please provide your mailing list in ASCII format.

TERMS: All orders prepaid. AMX, Visa, MC and Checks with Credit Card on file. Open invoices are processed on Credit Card after ten days.

No refunds on custom orders. No changes will be made once an order goes to production. This order form must be signed to process your order.

Design Fee = \$ _____
 Printing Fee: _____ Copies x _____ each = \$ _____
 Mailing Service: _____ Copies x _____ each = \$ _____
 S & H (8% UPS Ground, 13% Second Day, 22% Overnight and 23% plus International) = \$ _____
 Maryland Offices: Please add 6% Sales Tax = \$ _____
TOTAL COST = \$ _____

By my signature below, I acknowledge that all MJD Patient Communications product content is copyrighted. Unauthorized use includes, but is not limited to photocopying, digital dissemination and internet use. I hereby agree that any violation of this Agreement will constitute willful infringement and subject any doctor and/or company on whose behalf I am acting, to the remedies under 17 U.S.C. §504(c)(2) and §505 and that the U.S. District Court for the District of Maryland shall have proper venue and jurisdiction over such action.

Name: _____ Practice: _____ Specialty: _____

Address: _____ Website: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Check Enclosed: _____

Credit Card #: _____ Exp. Date: _____ Use this card for future orders: Yes No

Name on Credit Card: _____

Cardholder Signature: _____ Date: _____