

The 9th DIA China Annual Meeting

May 21-24 | Shanghai International Convention Center, China

Insertion Order



FINAL PROGRAM ADVERTISING | DEADLINE: APRIL 15, 2017

Advertiser Send communications and invoices to this address Company Name		Agency Send communications and invoices to this address Company Name					
				Contact Name		Contact Name	
				Address Line 1		Address Line 1	
Address Line 2		Address Line 2					
City, State/Province, Postal Code, Country		City, State/Province, Postal Code, Country					
Telephone Number		Telephone Number					
Email Address		Email Address					
	l Program - The 9 th DIA Chi	ina Annual Meeting					
Sizes and Rates: Page Size	Ad Dimensions	s R	ate				
Full Page 4 Color	18.5cm x 28cm	R	MB 10,000				
☐ Half Page 4 Color	18.5cm x 13cm	R	MB 5,000				
Inside Front Cover	18.5cm x 28cm	R	MB 15,000				
☐ Inside Back Cover	18.5cm x 28cm	R	MB 15,000				
☐ Centerfold/Central S	pread 37cm x 28cm	R	MB 18,000				
Please return completed form to: Mr. Peng ZHENG: zhengpeng@ccfdie.org or Ms. Jianying CHENG: chengjy@ccfdie.org. Please accept this as reservation for space in the above listed		Material Requirements Files may be emailed in high resolution PDF format to zhengpeng@ccfdie.org or chengjy@ccfdie.org on or before April 15, 2017. All PDFs must be CMYK, high resolution (300dpi) print quality, with all fonts and images imbedded. We will not be responsible for reproduction quality of ads supplied as RGB or in low resolutions.					
publication.							
Conditions: Cancellations or changes by the advertiser or its agency not lished closing date.		Payment Method					
DIA reserves the right to decline any advertising deemed inappropriate for the readership of any publication, whether in		P.O. #	in USD				
print or online versions. DIA has fina	l approval for all publica-	Bank Transfers should be made to:					
tion content and position. If your creative does not meet DIA criteria, you will be asked to furnish new material.		Account Name:	DIA (Beijing) Healthcare Information Consulting Ltd				
Authorization/ Signature		Account No.: Bank Name: Bank Address:	333757195112 Bank of China, Beijing Chaoyang Sub-branch 1st Floor, Tower A, Gateway, No. 18 Xiaguangli,				
Date		SWIFT Code:	North Road, East Third Ring, Chaoyang District, Beijing, 100027, P.R. China BKCH CN BJ 110				
Sales Contact: Mr. Peng ZHENG: +86-10-8221-2866* zhengpeng@ccfdie.org	6007	Company name, as	well as the Meeting ID 17975 must be included on ent to ensure payment to your account. <i>All local</i>				

payer.

and overseas charges incurred for the bank transfer must be borne by

Ms. Jianying CHENG: +86-10-8221-2866*6008

chengjy@ccfdie.org