



Society for Clinical Data Management
DATA DRIVEN

2011 ADVERTISING INSERTION ORDER Data Connections

ORGANIZATION NAME: _____

CONTACT Name: _____

CONTACT Address: _____

CONTACT Phone: _____

CONTACT E-Mail: _____

DATA CONNECTIONS

	1x	3x	6x	12x
Price Per Ad	\$299	\$284	\$268	\$252
Total	\$299	\$852	\$1,608	\$3,024

Number of Insertions: _____

Advertisement Hyperlink: _____

Amount Due: _____

Issue:

- | | |
|-----------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> January 2011 (deadline 12/30/10) | <input type="checkbox"/> July 2011 (deadline 6/15/11) |
| <input type="checkbox"/> February 2011 (deadline 1/15/11) | <input type="checkbox"/> August 2011 (deadline 7/15/11) |
| <input type="checkbox"/> March 2011 (deadline 2/15/11) | <input type="checkbox"/> September 2011 (deadline 8/15/11) |
| <input type="checkbox"/> April 2011 (deadline 3/15/11) | <input type="checkbox"/> October 2011 (deadline 9/15/11) |
| <input type="checkbox"/> May 2011 (deadline 4/15/11) | <input type="checkbox"/> November 2011 (deadline 10/15/11) |
| <input type="checkbox"/> June 2011 (deadline 5/15/11) | <input type="checkbox"/> December 2011 (deadline 11/15/11) |

Payment Required for Full Schedule

- Credit Card Type _____
- Credit Card Number _____
- Expiration Date _____
- Name on Card _____

Invoice Full Schedule

Payment by Check

Remit to: Jean Wenzel - SCDM - 555 E. Wells - Suite 1100 - Milwaukee, WI 53202

Fax: 414.276.3349 E-mail: jwenzel@scdm.org