



Global BioPharmaceutical Resources, Inc.

Insertion Order form

Please check the month(s) of choice (each banner ad will run for a month) and email the form to sales@gbprinc.com.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> January | <input type="checkbox"/> February | <input type="checkbox"/> March | <input type="checkbox"/> April |
| <input type="checkbox"/> May | <input type="checkbox"/> June | <input type="checkbox"/> July | <input type="checkbox"/> August |
| <input type="checkbox"/> September | <input type="checkbox"/> October | <input type="checkbox"/> November | <input type="checkbox"/> December |

Choose banner size:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> 468x60 pixel (Top home page) | <input type="checkbox"/> \$225/month | <input type="checkbox"/> \$1,170/ 6 months | <input type="checkbox"/> \$1,800/ year |
| <input type="checkbox"/> 728x90pixel (bottom of each page) | <input type="checkbox"/> \$225/month | <input type="checkbox"/> \$1,170/ 6 months | <input type="checkbox"/> \$1,800/year |
| <input type="checkbox"/> 300x250pixel (Top home page) | <input type="checkbox"/> \$295/month | <input type="checkbox"/> \$ 1,590/ 6 months | <input type="checkbox"/> \$ 2,700/year |
| <input type="checkbox"/> Sponsorship | <input type="checkbox"/> \$300/ web seminar | Title:_____ | |

Customize packages available. Please contact Sales@gbprinc.com or 301-353-8268.

Billing address:

Company Name_____

Address_____

City_____ State/Country/zip code_____

Tel: _____ Fax_____

Email: _____ URL_____

Payments:

- Visa Master Card American Express

Total amount to be charged_____

Credit card Number_____ Exp date_____

Signature_____

Payment is required prior to the posting of banner ads. All ad material should be in EPS format (please forward a jpeg format as well.)

