



DITEC iNK

Information Letter Sponsor Program

DITEC
6864 Cochran Road Solon, Ohio 44139
(440) 519-1555 Fax (440) 519-1556



Information Letter Sponsor Program

Our DITEC Ink Information Letter is read by more than **10,000** professionals in the diagnostic imaging, biomedical and clinical engineering industries.

Take advantage of the **Great Marketing Opportunity** of being associated with DITEC Ink.

E-Mail your **grayscale** and **color** artwork electronically (JPEG Format) to:
MJRoman@DITECnet.com

or send a scannable hardcopy to:

ATTN: InfoLetter, DITEC, Inc. 6864 Cochran Rd., Solon, OH 44139.

March Information Letter:

Commitment date:

February 12, 2010

Artwork due date:

February 23, 2010

June Information Letter:

Commitment date:

May 14, 2010

Artwork due date:

May 21, 2010

September Information Letter:

Commitment date:

August 13, 2010

Artwork due date:

August 20, 2010

December Information Letter:

Commitment date:

November 9, 2010

Artwork due date:

November 16, 2010

We will do the rest by embedding your promotional material in DITEC Ink.

Demonstrate your support for the Medical Equipment industry today.

Our **Readers**, Your **Customers**, will appreciate your commitment and support.



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Yes No

- Do you have a product special or a special product you wish to highlight?
- Do you possess a new must-have service and people don't yet know what it is or how to get it?
- Do you want to demonstrate your support for the diagnostic imaging management, service and support industry?
- Do you want to contact executives, managers and service professionals in the diagnostic imaging, clinical and biomedical engineering industry?
- Do you wish to associate yourself with the SIX-Time Winners of the "Best Training Programs" in the diagnostic imaging industry?

**If you answered YES to any of the above, then
CHOOSE YOUR SPONSORSHIP OPTION
and send your message to over 10,000 industry professionals.**

Please circle one of the following options

SIZE**	VERTICAL	HORIZONTAL	1X	2X (TOTAL)	3X (TOTAL)	4X (TOTAL)
1/4 PAGE	5.25"	4.0"	\$850	\$800 (\$1600)	\$755 (\$2265)	\$710 (\$2840)
1/2 PAGE	5.25"	8.0"	\$1300	\$1220 (\$2440)	\$1130 (\$3390)	\$1060 (\$4240)
FULL PAGE	10.5"	8.0"	\$2180	\$2000 (\$4000)	\$1800 (\$5400)	\$1700 (\$6800)

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NAME _____ TITLE _____

ORGANIZATION _____ DEPT. _____

ADDRESS _____ E-MAIL ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE() - FAX() -

BILLING DEPT _____ *PO # _____ SPONSORSHIP FEE ENCLOSED \$.

CREDIT CARD _____ *CREDIT CARD # _____ EXP. DATE _____

AUTHORIZED SIGNATURE _____ DATE _____

** Artwork must be in electronic format or capable of being scanned.

* All Purchase Orders will be assessed a \$25 Invoice Processing Fee.

All invoices will be assessed 1.5% per month (18% per annum) late fees when thirty or more days past due.

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