

## Classified (Help Wanted) Advertising

**Advertise help wanted, items for sale or other notifications using classified ads in the *HCP Insider*!**

The *HCP Insider* is HCP's most well-respected and well-read e-newsletter and the ideal vehicle to reach home care decision makers with your classified ad. Published every Friday, the *Insider* is distributed exclusively to HCP members.

### Quick Stats

- Circulation: 600+ Members; Non-members, 100
- Distribution: Email with hyperlink to downloadable pdf file
- Frequency: Weekly every Friday (48 issues)
- Audience: HCP members; policymakers, legislators and legislative staff
- Features: Live links to Web site; interactivity between document and HCP/CHC Web sites



### Instructions for placing a classified/help wanted ad:

- Write your help wanted or other ad and decide the dates you want the ad to run.
- Email your ad copy and the dates you wish to run the ad to Marissa Cray at [cray@nyshcp.org](mailto:cray@nyshcp.org) or 518.463.1118, ext. 824. **FOR AN AD TO RUN ON FRIDAY, THE AD COPY MUST BE RECEIVED NO LATER THAN WEDNESDAY; PAYMENT IS REQUIRED BY FRIDAY NOON.**
- HCP will format the ad, determine cost and provide information, contract and invoice to advertiser for approval.
- Upon receipt of signed contract and advance payment by advertiser, HCP will place ads as requested.

### Classified ad rates:

	1x		6x		12x	
	NM	Member	NM	Member	NM	Member
Classified ad rates	\$85/col in	\$45/col in	\$75/col in	\$40/col in	\$60/col in	\$30/col in



# HCP Insider Classified (Help Wanted) Advertising Contract

3 ways to submit - Fax your signed contract and credit card payment to 518.463.1606, email your completed contract to [hcp@nyshcp.org](mailto:hcp@nyshcp.org), or mail your contract to HCP, 20 Corporate Woods Blvd., 2nd Floor, Albany, NY 12211

## Company Information

Organization Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## Classified Advertising Instructions

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- Write your help wanted or other ad and decide the dates you want the ad to run.
- Email your ad copy and the dates you wish to run the ad to Marissa Crary at [crary@nyshcp.org](mailto:crary@nyshcp.org) or 518.463.1118, ext. 824.
- HCP will format the ad, determine cost and provide information, contract and invoice to advertiser for approval.
- Upon receipt of signed contract and advance payment by advertiser, HCP will place ads as requested.

Classified ad rates (based on # column inches)	1x		6x		12x	
	NM	Member	NM	Member	NM	Member
	\$85/col in	\$45/col in	\$75/col in	\$40/col in	\$60/col in	\$30/col in

## Classified Advertising Information

Column Inch Size: \_\_\_\_\_  
 (submit copy to HCP to determine number of column inches)  
 Rate: \_\_\_\_\_ (per column inch)  
 Size x Rate: \_\_\_\_\_ (cost per insertion)  
 Frequency: \_\_\_\_\_ (number of insertions)  
 Insertion Dates: \_\_\_\_\_  
**Total Classified Advertising Cost:** \_\_\_\_\_

## HCP Classified Advertising Policies & Procedures

Only advertising contracts received with payment will be binding. HCP reserves the right to reject any classified/help wanted advertisement it does not deem as suitable. Email ad copy to [hammar@nyshcp.org](mailto:hammar@nyshcp.org). Advertisers must abide by all HCP policies relating to payment of monies due.

I am a duly authorized party to bind this agreement, and hereby agree to the above:

Authorized Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

## HCP Insider classified advertising payment

*Pre-payment in full is required. Advertising is not refundable or transferable.*

Check (payable to HCP) OR Credit Card Payment:  Visa  MasterCard  Discover  
 Card#: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code\*: \_\_\_\_\_  
 Cardholder Name: (print) \_\_\_\_\_ \*3 or 4 digit code located on the front or back of the card  
 Cardholder Signature: \_\_\_\_\_