

CANADIAN REPRINT RATE SHEET AND ORDER FORM

# of Copies	1-2 Pages (1 pg x 2 sides)	3-4	5-6	7-8	9-10	11-12
100	\$680	\$810	\$905	\$1,030	\$1,150	\$1,265
200	\$745	\$925	\$1,030	\$1,235	\$1,380	\$1,520
300	\$920	\$1,140	\$1,210	\$1,490	\$1,610	\$1,795
400	\$955	\$1,210	\$1,285	\$1,630	\$1,755	\$1,960
500	\$1,015	\$1,260	\$1,345	\$1,840	\$2,170	\$2,410

- Payable in Canadian funds (includes all applicable taxes)
- All reprints require a 50% deposit or payment in full in advance by cheque, wire payment or email transfer
- Please make cheques payable to Multimed Inc.
- Pricing for colour pages; an additional charge
- **Shipping and handling included (within Canada only)**
- Invoicing available, contact Karen Irwin

Reprints Of: Volume: _____ Issue: _____ Pages: _____

Title: _____

Author(s): _____

Quantity: _____ Rate (See Above): _____

BILLING ADDRESS:

First Name: _____ Last Name: _____

Company: _____ Address: _____

City: _____ Province: _____ Postal Code: _____

E-Mail Address: _____

Phone: _____ Fax: _____

SHIPPING ADDRESS:

First Name: _____ Last Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Phone: _____

PAYMENT INFORMATION

Cheque or Money Order enclosed (make payable to Multimed Inc. in Canadian funds)

Credit Card: Charge \$_____ to my: Visa MasterCard

Card Number: _____ Expiry Date: _____ CVC: _____

Card Holder: _____ Signature: _____

Send completed form to Karen Irwin, Multimed Inc.

FAX: 905-875-2864 **E-MAIL:** karen_cancerkn@multi-med.com **MAIL:** Multimed Inc., 66 Martin St., Milton, Ontario, L9T 2R2, Canada

For further information, please contact Multimed Inc.

TOLL FREE: 1-888-834-1001 or 905-875-2456 **E-MAIL:** karen_cancerkn@multi-med.com