A high-profile advertising opportunity delivered directly to the attendees at the AAP meeting and headquarter hotel, this is the first meeting related material attendees will see each day. Product samples, brochures, and invites are all welcome.

<table>
<thead>
<tr>
<th>RATES*</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Distribution day</td>
<td>Cost</td>
</tr>
<tr>
<td>One day</td>
<td>$5,500 net</td>
</tr>
<tr>
<td>Two-day package</td>
<td>$10,000 net</td>
</tr>
</tbody>
</table>

*Bags limited to a maximum of 20 inserts.

<table>
<thead>
<tr>
<th>CLOSING DATES</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Space</td>
<td>Inserts due</td>
</tr>
<tr>
<td>8/23</td>
<td>9/3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6,200 per day, include 5% overage.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MECHANICAL SPECIFICATIONS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Inserts not to exceed 8-1/2” x 11” and two leaves. Maximum weight of 4 ounces. Product samples approved by the AAP are welcome.</td>
<td></td>
</tr>
</tbody>
</table>

**Sales contact**

Advertising sales office
The Walchli Tauber Group, Inc.
2225 Old Emmorton Road, Suite 201
Bel Air, MD 21015
Tel (443) 512-8899
Fax (443) 512-8909
www.wt-group.com

Joe Frank, Jr., MSB
National Advertising Sales Manager
Extension 114
joseph.frank@wt-group.com

**DISTRIBUTION**

Takes place on Saturday and Sunday. AAP will personally hand your sample, brochure, invite, and/or visual aid to registered attendees of the Conference. Distributed via hand-out personnel in high-traffic areas throughout the Convention Center.
How to reserve


2. Send the Agreement and insert proof to the WTG by August 27, 2019.

3. WTG will obtain approval of the ad from AAP and notify you within two business days of submission. If changes are necessary, you must submit the corrected insert for final approval.

4. Once approved, inserts must be shipped to arrive by September 3, 2019.

Shipping address

Ridge Printing
Attn: Debbie Gildeleon
8900 Yellow Brick Road
Baltimore, MD 21237
(410) 668-4780

Shipping instructions

1. All Pallets must measure 48” X 40” and not be stacked higher than 60” high.

2. Individual cartons are not to exceed 60 pounds.

3. Multiple items are not to be packaged in the same carton.

4. Full cartons should contain the same quantity of inserts.

5. Partial cartons should be distinguished from full cartons and be located on top of the shipment and marked as “partial carton.”

6. All cartons should be labeled with the following information:
   - American Academy of Pediatrics, National Conference & Exhibition
   - Distribution date (Saturday/Sunday)
   - Company name, product, and insert/ad title
   - Quantity per carton, number of carton

Terms and conditions

1. Payment may be made by credit card (Master Card or Visa only), check paid directly to The Walchli Tauber Group, Inc. (WTG).

2. All sales are on a first come first served basis. No cancellations accepted.

3. All rates are net prices.

4. AAP has contracted for bag distribution to meeting attendees. AAP and WTG cannot guarantee all attendees will receive the doctors bag.

5. Please be sure to submit 5% to 10% overs so all bags can contain your materials.

6. Inserts should not exceed 8 ½ x 11 inches and 4 ounces. Call for pricing on larger inserts and product samples.

7. Agreement and materials subject to and contingent upon AAP approval.

8. Please be sure to include the following disclosures on any ad placed for Product Theaters and/or Symposia:
   - Product Theaters: Options depending on whether there are one or two faculty, “The presentation for this Product Theater are not designated for CME credit. This presentation is neither sponsored nor endorsed by the American Academy of Pediatrics.”
   - For Symposia: “This symposia is neither sponsored nor endorsed by the American Academy of Pediatrics.”

For questions or inquiries, contact the Walchli Tauber Group, Inc. at (443) 512-8899

Doctor Bag Order Form
To reserve space, return a signed copy via a secure service to Roland Keve of the Walchli Tauber Group, Inc. at roland.keve@wt-group.com.

Contact information

<table>
<thead>
<tr>
<th>Agency name:</th>
<th>Company/Product:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact:</td>
<td>Title:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Website:</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Insert Rates

<table>
<thead>
<tr>
<th>Number of inserts</th>
<th>Date of delivery</th>
<th>Pricing (6,200 per day)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Saturday, October 26</td>
<td>$5,500</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>Sunday, October 27</td>
<td>$5,500</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>Two-day package</td>
<td>$10,000</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td><strong>Total cost</strong></td>
<td><strong>$</strong></td>
<td><strong>$</strong></td>
</tr>
</tbody>
</table>

Payment information

☐ Credit card payment

- Number: ____________________________
- Expiration date: ____________________
- Name: _____________________________
- Billing address: ____________________

- Signature: _________________________
- Amount: ___________________________

☐ WTG invoice

The Walchli Tauber Group will invoice, payable directly to WTG net 30 days.

Acknowledgement

I acknowledge that as an authorized representative of the above stated company, I have received, reviewed and agree to the AAP Doctor's Bag Terms and Conditions (page 2), total cost and method of payment.

- Signature: _________________________
- Date: _____________________________
- Printed name: _____________________
- Phone: ___________________________