



Deadline: June 17, 2022

My Hometown Health Print and Distribution Order

Volume 15, Issue 4
Fall 2022

Please return this completed and signed form by June 17, 2022 to Brentwood Communications, Inc. by fax (615-425-2844) or by email to lindsay@brentwoodcommunications.com. For information or questions, call 615-425-0821.

Hospital: _____

Total Print Quantity:

- A. # For hospital distribution
B. # For mailing purposes
C. # For newspaper distribution (Total of ALL newspapers below)
D. # Total print quantity

Shipping address for magazines to be sent to hospital:

_____, Attn: _____
_____, Phone: _____

Shipping address for magazines to be sent to mailer.

(If Brentwood Communications will be handling your mailing, check here _____. If so, you do not need to fill in the mailer's shipping address. If you are handling your own mailing, you will need to provide the necessary indicia art by the deadline for this form.)

_____, Attn: _____
_____, Phone: _____

Shipping address for magazines to be sent to newspaper(s).

If Brentwood Communications will be handling your newspaper distribution, check here _____

Note: Magazines are due to be shipped out by mid-September – please allow at least two weeks for delivery to appropriate newspapers in order to meet the insertion deadlines.)

1. Newspaper Name and address _____

Quantity for this newspaper _____

Contact and Phone _____

Insertion Date _____ Deadline _____

3. Newspaper Name and address _____

Quantity for this newspaper _____

Contact and Phone _____

Insertion Date _____ Deadline _____

2. Newspaper Name and address _____

Quantity for this newspaper _____

Contact and Phone _____

Insertion Date _____ Deadline _____

4. Newspaper Name and address _____

Quantity for this newspaper _____

Contact and Phone _____

Insertion Date _____ Deadline _____

Hospital Authorized Representative(s) _____ / _____

Signature

Date