

Price Estimate Form

Name		
Company		
Address		
E-mail		
Tel.		
I. Type of service requested:		
Newsle	Newsletter	
Journal article		
Review article		
Newspaper article		
Abstract		
Powerl	Point slide set	
Patient brochure		
Patient educational materials		
Scienti	fic poster	
Grant F	Proposal	
CME qı	uestions	
	ith explanation of answers	
	ithout explanation of answers	
Needs	assessment	
Other -	- please describe:	
II. Topic area:		
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III. Target audience:		
IV. Size of the project – please indicate the number of pages/words required:		
V. Are there graphics required? Yes No		
If yes – who is responsible for the graphics?		
VI. Who is responsible for obtaining and paying for reference materials?		
VII. Will research materials be supplied? Yes No		
VIII. Deadline:		