

**BUSINESS PUBLICATION CIRCULATION STATEMENT
FOR THE 6 MONTH PERIOD ENDED JUNE 2009
(Including Supplementary Data)**

No attempt has been made to rank the information contained in this report in order of importance, since BPA Worldwide believes this is a judgment, which must be made by the user of the report.

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MEDICAL MEETINGS

Penton Media
11 River Bend Drive South
Stamford, CT 06907-0949
Tel.: 203.359.9900
Fax: 203.358.5812
www.meetingsnet.com

Official Publication of: None
Established: 1973
Issues Per Year: 8

FIELD SERVED

MEDICAL MEETINGS serves the field of the medical/scientific industry: international/ foreign/ national/ regional/ state/ county/ local medical or scientific associations; hospital and medical centers, pharmaceutical and biomedical equipment manufacturers/ distributors; healthcare and scientific education facilities and medical schools; private healthcare and scientific foundations; scientific healthcare and government agencies; insurance companies; association management firms; independent meeting planning companies; tour operators/ travel agencies, service organizations and others allied to the field.

DEFINITION OF RECIPIENT QUALIFICATION

Qualified recipients include Administrative Executives: Chairman, CEO, COO, CIO, President, Owner, Executive Director Executive Vice President, Vice President, Director, Director General, Hospital Administrator, Chief Medical Director, Medical Staff Director; Other Administrative Executives: Treasurer/ Controller, Administrative/ Executive Assistant/ Secretary; Meeting/ Travel Convention Personnel: Meeting Planner/ Manager/ Director, Conference/ Exhibit Planner/ Manager, Convention Planner/ Manager, Trade Show/ Exhibit Manager, Incentive Program Planner/ Manager, Program Manager/Director, Travel Coordinator; Education & Training Personnel: Director/Manager of Education/CME/Training, Human Resource Director; Advertising & Sales Personnel: Marketing Communications Manager/ Director, Sales/ Marketing Manager/ Director, Director/ Manager of PR/ Promotions/ Advertising, Product Manager, Director of Communications; as well as Government Officials, that are responsible for meetings and/ or incentive travel programs or exhibit activities for a healthcare or scientific organization. Also included are Independent Meeting Planner, Meeting Consultant, and others related to the medical field.

PURPOSE

This circulation statement contains multiple analyses of respondents who indicate the following types of services/ facilities they use for their meetings and incentive travel programs: resorts, downtown hotels, suburban hotels, conference centers, airport hotels, convention centers or auditoriums, all-suites, cruise ships, gaming properties/facilities, convention & visitors bureaus, and other services/facilities.

AVERAGE NON-QUALIFIED CIRCULATION	
NON-QUALIFIED Not Included Elsewhere	Copies
Other Paid Circulation _____	51
Advertiser and Agency _____	1,200
Rotated or Occasional _____	2
Allocated for Trade Shows and Conventions _____	135
Electronic _____	-
All Other _____	491
TOTAL	1,879

1. AVERAGE QUALIFIED CIRCULATION BREAKOUT FOR PERIOD						
QUALIFIED CIRCULATION	Total Qualified		Qualified Non-Paid		Qualified Paid	
	Copies	Percent	Copies	Percent	Copies	Percent
Individual _____	9,798	81.4	9,798	81.4	-	-
Sponsored Individually Addressed _____	-	-	-	-	-	-
Membership Benefit _____	2,233	18.6	2,233	18.6	-	-
Multi-Copy Same Addressee _____	-	-	-	-	-	-
Single Copy Sales _____	-	-	-	-	-	-
TOTAL QUALIFIED CIRCULATION	12,031	100.0	12,031	100.0	-	-

2. QUALIFIED CIRCULATION BY ISSUES WITH REMOVALS AND ADDITIONS FOR PERIOD															
2009 Issue	Number Removed	Number Added	Print Version Only (A)	Electronic Version Only (B)	Qualified Non-Paid	Qualified Paid	Total Qualified	2009 Issue	Number Removed	Number Added	Print Version Only (A)	Electronic Version Only (B)	Qualified Non-Paid	Qualified Paid	Total Qualified
March/ April _____	89	16	11,318	682			12,000	June _____	-	-	11,393	632			12,025
TOTAL								TOTAL	1,132	924					

*See Paragraph 9

3a. BUSINESS/OCCUPATION BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2009											
This issue is 0.1% or 8 copies below the average of the other 3 issues reported in Paragraph two.											
BUSINESS AND INDUSTRY	TOTAL QUALIFIED	PERCENT OF TOTAL	Print Version Only (A)	Electronic Version Only (B)	Total Recipients Responsible for Meetings/ Incentive Programs	CLASSIFICATION BY TITLE (SEE NOTE 1)					
						Administrative Executives (A)	Other Administrative Executives (B)	Meeting/ Travel/ Convention Personnel (C)	Education & Training Personnel (D)	Advertising and Sales Personnel (E)	Procurement Management (I)
International Medical or Scientific Association _	557	4.6	525	32	557	433	31	58	14	15	3
Foreign Medical or Scientific Association ____	85	0.7	83	2	85	35	28	19	1	2	-
National Medical or Scientific Association_____	422	3.5	390	32	422	278	37	77	15	10	4
Regional/State/County/Local Medical or Scientific Association _____	650	5.4	613	37	650	449	73	54	48	10	2
Total Associations	1,714	14.3	1,611	103	1,714	1,195	169	208	78	37	9
Healthcare or Scientific Education Facility/ Medical School _____	1,099	9.1	1,051	48	1,099	774	89	104	105	19	6
Hospitals/Medical Centers_____	1,849	15.4	1,788	61	1,849	1,372	126	71	251	16	12
Pharmaceutical or Biomedical Equipment Manufacturer or Distributor _____	3,319	27.6	3,113	206	3,319	2,486	242	316	103	144	27
Medical Education/communication or marketing company _____	591	4.9	528	63	591	314	43	104	74	50	4
Private Foundations (Healthcare or Scientific) _	219	1.8	207	12	219	156	11	12	27	10	3
Government Agencies (Healthcare or Scientific)_____	248	2.1	236	12	248	189	13	10	23	2	1
Association Management Firms _____	185	1.5	176	9	185	140	8	24	6	5	2
Independent Meeting Planning Companies/Tour Operators/Travel Agency ____	373	3.1	335	38	373	230	8	83	10	34	6
Insurance organization (including but not limited to: managed care, health maintenance)	79	0.7	69	10	79	48	5	15	5	4	1
Sub-Total	9,676	80.5	9,114	562	9,676	6,904	714	947	682	321	71
Percent	80.5		75.8	4.7	80.5	57.4	5.9	7.9	5.7	2.7	0.6
Alliance for Continuing Medical Education Association Members _____	2,349	19.5	2,279	70	-						
TOTAL QUALIFIED CIRCULATION	12,025	100.0	11,393	632	9,676						

(A) Administrative Executives: Chairman, CEO, COO, CIO, President, Owner, Executive Director, Executive Vice President, Vice President, Director, Director General, Hospital Administrator, Chief Medical Director, Medical Staff Director

(B) Other Administrative Executives: Treasurer/Controller, Administrator/Executive Assistant/Secretary

(C) Meeting/Travel Convention Personnel: Meeting Planner, Manager /Director, Conference/ Exhibit Planner/ Manager, Convention Planner/ Manager, Trade Show/ Exhibit Manager, Incentive Program Planner/ Manger, Program Manger/ Director, Travel Coordinator

(D) Education & Training Personnel: Director/Manager of Education/CME/Training, Human Resource Director

(E) Advertising & Sales Personnel: Marketing Communications Manager/Director, Sales/Marketing Manager/Director, Director/Manager of PR/Promotions/Advertising, Product Manager, Director of Communications

(I) Procurement Management: Procurement Director/Manager/Supervisor, Purchasing Director/Manager/ Supervisor, Sourcing Director/Manager

SUPPLEMENTARY DATA FOR ISSUE OF MAY 2009

This is an analysis of the 9,676 or 80.5% respondents who indicated the types of Services/Facilities they use for their meetings and incentive travel programs. See questionnaire used to elicit these data on the back of this report. Since any one respondent may have checked more than one response, the totals for each of these (i.e.: products and services) should not be added together as the total may exceed the total circulation. These data are presented for statistical and marketing purposes.

BUSINESS & INDUSTRY	TOTAL QUALIFIED	PERCENT OF TOTAL	Total Qualified Respondents	Downtown Hotel	Resort	Airport Hotel	Suburban Hotel	Conference Center	Convention Center or Auditorium	All-Suite	Cruise Ship	Gaming Property/Facility	Convention & Visitors' Bureau	Other
Associations (Medical or Scientific)														
International Medical or Scientific Association _____	557	4.6	557	439	378	290	278	317	324	330	181	247	313	46
Foreign Medical or Scientific Association _____	85	0.7	85	61	68	57	50	53	29	49	48	47	21	3
National Medical or Scientific Association _____	422	3.5	422	298	248	186	188	219	199	177	96	122	148	55
Regional/State/County/Local Medical or Scientific Association _____	650	5.4	650	253	186	129	149	211	165	132	57	69	121	346
Total Associations	1,714	14.3	1,714	1,051	880	662	665	800	717	688	382	485	603	450
Healthcare or Scientific Education Facility/Medical School _____	1,099	9.1	1,099	524	377	261	362	456	365	281	120	134	249	455
Hospitals/Medical Centers_	1,849	15.4	1,849	601	446	252	417	639	397	306	140	162	265	1,029
Pharmaceutical or Biomedical Equipment Manufacturer or Distributor _	3,319	27.6	3,319	2,150	1,790	1,346	1,548	1,740	1,475	1,477	777	977	1,138	628
Medical Education/communication or marketing company _____	591	4.9	591	388	259	233	245	331	268	170	61	97	176	121
Private Foundations (Healthcare or Scientific) ___	219	1.8	219	110	105	40	77	81	59	58	34	28	42	71
Government Agencies (Healthcare or Scientific)___	248	2.1	248	68	38	34	49	85	65	31	13	19	47	149
Association Management Firms _____	185	1.5	185	118	78	51	77	87	73	59	18	24	53	52
Independent Meeting Planning Companies/Tour Operator/Travel agency _____	373	3.1	373	268	249	184	210	247	189	174	100	116	154	55
Insurance organization (including but not limited to: managed care, health maintenance) _____	79	0.7	79	45	39	22	40	39	27	26	9	11	16	14
Sub-total	9,676	80.5	9,676	5,323	4,261	3,085	3,690	4,505	3,635	3,270	1,654	2,053	2,743	3,024
Alliance for Continuing Medical Education Association Members _____	-	-												
TOTAL QUALIFIED CIRCULATION	9,676	80.5												

3b. QUALIFICATION SOURCE BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2009

QUALIFICATION SOURCE	Qualified Within			Print Version Only (A)	Electronic Version Only (B)	Qualified Non-Paid	Qualified Paid	Total Qualified	Percent
	1 Year	2 Years	3 Years						
I. Direct Request: _____	7,894	1,359	423	9,114	562			9,676	80.5
II. Request from recipient's company: _____	-	-	-	-	-			-	-
III. Membership Benefit: _____	2,349	-	-	2,279	70			2,349	19.5
IV. Communication from recipient or recipient's company (other than request): _____	-	-	-	-	-			-	-
V. TOTAL - Sources other than above (listed alphabetically): _____	-	-	-	-	-			-	-
Association rosters and directories _____	-	-	-	-	-			-	-
Business directories _____	-	-	-	-	-			-	-
Manufacturer's, distributor's, and wholesaler's lists _____	-	-	-	-	-			-	-
Other sources _____	-	-	-	-	-			-	-
VI. Single Copy Sales: _____	-	-	-	-	-			-	-
TOTAL QUALIFIED CIRCULATION	10,243	1,359	423	11,393	632			12,025	100.0
PERCENT	85.2	11.3	3.5	94.7	5.3			100.0	

3c. MAILING ADDRESS BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2009

MAILING ADDRESS	Print Version Only (A)	Electronic Version Only (B)	Qualified Non-Paid	Qualified Paid	Total Qualified	Percent
Individuals by name and title and/or function _____	11,393	632			12,025	100.0
Individuals by name only _____	-	-			-	-
Titles or functions only _____	-	-			-	-
Company names only _____	-	-			-	-
Multi-Copy Same Addressee copies _____	-	-			-	-
Single Copy Sales _____	-	-			-	-
TOTAL QUALIFIED CIRCULATION	11,393	632			12,025	100.0

4. GEOGRAPHICAL BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2009

State & Zip Code	Print Version Only (A)	Electronic Version Only (B)	Qualified Non-Paid	Qualified Paid	Total Qualified	Percent
039-049 Maine _____	49	5			54	
030-038 New Hampshire _____	47	4			51	
050-059 Vermont _____	29	1			30	
010-027 Massachusetts _____	382	26			408	
028-029 Rhode Island _____	34	1			35	
060-069 Connecticut _____	199	12			211	
NEW ENGLAND	740	49			789	6.6
100-149 New York _____	782	38			820	
070-089 New Jersey _____	871	57			928	
150-196 Pennsylvania _____	696	41			737	
MIDDLE ATLANTIC	2,349	136			2,485	20.7
430-459 Ohio _____	411	28			439	
460-479 Indiana _____	259	7			266	
600-629 Illinois _____	739	47			786	
480-499 Michigan _____	261	12			273	
530-549 Wisconsin _____	230	13			243	
EAST NO. CENTRAL	1,900	107			2,007	16.7
550-567 Minnesota _____	233	11			244	
500-528 Iowa _____	122	2			124	
630-658 Missouri _____	225	11			236	
580-588 North Dakota _____	32	1			33	
570-577 South Dakota _____	39	1			40	
680-693 Nebraska _____	80	4			84	
660-679 Kansas _____	143	11			154	
WEST NO. CENTRAL	874	41			915	7.6
197-199 Delaware _____	33	2			35	
206-219 Maryland _____	295	17			312	
200-205 Washington, DC _____	103	7			110	
220-246 Virginia _____	244	13			257	
247-268 West Virginia _____	53	3			56	
270-289 North Carolina _____	327	14			341	
290-299 South Carolina _____	90	1			91	
300-319 Georgia _____	281	24			305	
320-349 Florida _____	554	35			589	
SOUTH ATLANTIC	1,980	116			2,096	17.4
400-427 Kentucky _____	150	6			156	
370-385 Tennessee _____	201	9			210	
350-369 Alabama _____	153	7			160	
386-397 Mississippi _____	75	3			78	
EAST SO. CENTRAL	579	25			604	5.0
716-729 Arkansas _____	64	2			66	
700-714 Louisiana _____	125	1			126	
730-749 Oklahoma _____	114	6			120	
750-799 Texas _____	643	39			682	
WEST SO. CENTRAL	946	48			994	8.3
590-599 Montana _____	38	-			38	
832-838 Idaho _____	41	1			42	
820-831 Wyoming _____	21	1			22	
800-816 Colorado _____	205	9			214	
870-884 New Mexico _____	39	-			39	
850-865 Arizona _____	125	13			138	
840-847 Utah _____	97	1			98	
889-898 Nevada _____	54	2			56	
MOUNTAIN	620	27			647	5.4
995-999 Alaska _____	6	-			6	
980-994 Washington _____	145	10			155	
970-979 Oregon _____	99	6			105	
900-961 California _____	1,070	66			1,136	
967-968 Hawaii _____	8	-			8	
PACIFIC	1,328	82			1,410	11.7
UNITED STATES	11,316	631			11,947	99.4
969 & 004-009 U.S. Territories _____	9	1			10	
Canada _____	54	-			54	
Mexico _____	-	-			-	
Other International _____	13	-			13	
APO/FPO _____	1	-			1	
TOTAL QUALIFIED CIRCULATION	11,393	632			12,025	100.0

QUESTIONNAIRE USED BY PUBLICATION TO ELICIT SUPPLEMENTARY DATA:

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 Title _____
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Signature required _____ Date _____

2 How would you like to receive your copy of *Medical Meetings*? (If you want to receive the digital version of the magazine, we must have your email address.)

- D Digital
 P Print

3 Are you involved in the selection, authorization, approval, planning and/or review of medical meetings or incentive travel programs or exhibit activities for healthcare or scientific organization?

- 1 Yes
 2 No

If NO, please route this form to the appropriate person in your organization.

4 What best describes your organization?

(check only ONE box)

- 01 International Medical or Scientific Association
 02 Foreign Medical or Scientific Association
 03 National Medical or Scientific Association
 04 Regional/State/County/Local Medical or Scientific Assn.
 05 Healthcare or Scientific Education Facility/Medical School
 06 Hospital or Medical Center
 07 Pharmaceutical or Biomedical Equipment Manufacturer/Distributor
 08 Medical education/communication or marketing company
 09 Private Healthcare or Scientific Foundation
 10 Scientific Healthcare or Government Agency
 11 Association Management Firm
 12 Independent Meeting Planning Company
 13 Tour Operator/Travel Agency
 15 Insurance organization (including, but not limited to, managed care, health maintenance)
 20 Others Allied to the Field (please specify) _____

5 What is your title classification? (check only ONE box)

- A **ADMINISTRATIVE EXECUTIVES:** Chairman, CEO, COO, CIO, President, Owner, Executive Director, Vice President, Exec. Vice President, Director, Director General, Hospital Administrator, Chief Medical Director, Medical Staff Director
 B **OTHER ADMINISTRATIVE EXECUTIVES:** Treasurer/Controller, Administrative/Executive Assistant/Secretary
 C **MEETING/TRAVEL CONVENTION PERSONNEL:** Meeting Planner/Manager/Director, Conference/Exhibit Planner/Manager, Convention Planner/Manager, Trade Show/Exhibit Manager, Incentive Program Planner/Manager, Program Manager/Director, Travel Coordinator
 D **EDUCATION & TRAINING PERSONNEL:** Director/Manager of Education/CME/Training, Scientific Affairs, Professional Education/Grants/Academic Affairs/Medical Education, Medical Affairs, New Product Development, Human Resource Director
 E **ADVERTISING & SALES PERSONNEL:** Marketing Communications Manager/Director, Sales/Marketing Manager/Director, Director/Manager of PR/Promotions/Advertising, Product Manager, Director of Communications
 F **GOVERNMENT OFFICIALS**
 I **PROCUREMENT MANAGEMENT:** Procurement Director/Manager/Supervisor, Purchasing Director/Manager/Supervisor, Sourcing Director/Manager
 H **OTHERS RELATED TO THE FIELD** (please specify) _____

6 What types of SERVICES/FACILITIES do you use for your meetings and incentive travel programs?

(check all that apply)

- 01 Resort
 02 All-suits
 03 Downtown Hotel
 04 Cruise Ship
 05 Suburban Hotel
 06 Conference Center
 07 Airport Hotel
 08 Gaming Property/Facility
 09 Convention Center or Auditorium
 10 Convention & Visitors Bureau
 15 Other _____

7 Check ALL destinations inside the USA where you have held or plan to hold meetings or incentive travel programs.

- 51 New England (ME, NH, VT, MA, RI, CT)
 52 Middle Atlantic (NY, NJ, PA)
 53 South Atlantic (DE, MD, DC, VA, WV)
 54 South East Atlantic (NC, SC, GA, FL)
 55 East North Central (OH, IN, IL, MI, WI)
 56 West North Central (MN, IA, MO, ND, SD, NE, KS)
 57 East South Central (KY, TN, AL, MS)
 58 West South Central (AR, LA, OK, TX)
 59 Mountain (MT, ID, WY, CO, NM, AZ, UT, NV)
 60 Pacific (WA, OR, CA)
 61 Alaska
 62 Hawaii
 70 Not applicable

8 Do you plan meetings outside the United States? (By checking yes, you will receive *Beyond Borders*, the annual supplement about planning international meetings.)

- A Yes
 B No

Check ALL destinations outside the USA where you have held or plan to hold meetings or incentive travel programs.

- 01 Caribbean
 02 Europe
 03 Mexico
 04 Canada
 05 Asia/Pacific
 06 Bermuda
 07 Africa/Near East
 08 Central/South America
 09 None outside the USA
 15 Other _____

9 Check ALL functions for which you have responsibility in your company:

- 01 Meeting Planning
 02 Site Selection
 03 Exhibits/Trade Shows
 04 Convention Management
 05 Other _____

10 How many off-site meetings (including incentive travel, training, and education) does your company or division hold each year?

- 1 1-4
 2 5-9
 3 10-14
 4 15-19
 5 20-24
 6 25-29
 7 30-34
 8 35-39
 9 40 or more

11 Approximate attendance at your meetings? (check all that apply)

- 1 **DELEGATES**
 01 Less than 50
 02 51-100
 03 101-200
 04 201-500
 05 501-1000
 06 1,001-2,500
 07 2,501-5,000
 08 5,001-7,500
 09 7,501 or more
 15 N/A

12 How much exhibit space (i.e. square foot) do your events require? (check one)

- 7 Greater than 500,000
 8 250,001 - 500,000
 2 100,001 - 250,000
 3 50,001 - 100,000
 4 25,000 - 50,000
 5 Less than 25,000
 6 N/A

Allow 4 to 6 weeks for processing. Incomplete forms cannot be processed or acknowledged. The publisher reserves the right to serve only those individuals who meet the publication qualifications.

CS7001

MASTER - rev. 9/17/07

7. AVERAGE ANNUAL AUDITED QUALIFIED CIRCULATION AND CURRENT UNAUDITED CIRCULATION STATEMENTS

6-Month Period Ended:	Audited Data	Audited Data	Audited Data	Audited Data	Audited Data	Circulation Claim
	2005	2006	2007	January - June 2008	July - December 2008	January - June 2009*
Total Audit Average Qualified	12,010	12,029	12,036	12,001	12,116	12,031
Qualified Non-Paid Total	12,010	12,029	12,036	12,001	12,116	12,031
Print Only	12,010	12,029	11,703	10,907	11,230	11,365
Electronic Only	-	-	333	1,094	886	666
Qualified Paid Total	-	-	-	-	-	-
Print Only	-	-	-	-	-	-
Electronic Only	-	-	-	-	-	-
Post Expire Copies included in Paid Circulation	**NC	**NC	**NC	**NC	**NC	**NC
Average Annual Order Price	**NC	**NC	**NC	**NC	**NC	**NC

*NOTE: January - June 2009 data is unaudited. With each successive period, new data will be added until six 6-month periods are displayed.

**NC = None Claimed.

8. PAID CIRCULATION DATA

**NC	Average Annual Subscription Order Price for the Period. (includes promotional incentive value, if any)
8	Issues Per Year
**NC	All Single Copy Sales Prices for the Period
**NC	Renewal Rate of Paid Subscribers (Optional)

9. ADDITIONAL DATA

METHOD OF DISTRIBUTION

All qualified circulation conforms to the field served of a recipient's qualification, as reported. Print copies are distributed via postal services or other carriers. Recipients who request the electronic version are notified via email when the version is available.

PARAGRAPHS 5 AND 6 ARE NOT REQUIRED.

1. AVERAGE QUALIFIED CIRCULATION BREAKOUT FOR PERIOD - PRINT VERSION ONLY

QUALIFIED CIRCULATION	Total Qualified		Qualified Non-Paid		Qualified Paid	
	Copies	Percent	Copies	Percent	Copies	Percent
Individual	9,132	80.4	9,132	80.4	-	-
Sponsored Individually Addressed	-	-	-	-	-	-
Membership Benefit	2,233	19.6	2,233	19.6	-	-
Multi-Copy Same Addressee	-	-	-	-	-	-
Single Copy Sales	-	-	-	-	-	-
TOTAL QUALIFIED CIRCULATION	11,365	100.0	11,365	100.0	-	-

1. AVERAGE QUALIFIED CIRCULATION BREAKOUT FOR PERIOD - ELECTRONIC VERSION ONLY

QUALIFIED CIRCULATION	Total Qualified		Qualified Non-Paid		Qualified Paid	
	Copies	Percent	Copies	Percent	Copies	Percent
Individual	666	100.0	666	100.0	-	-
Sponsored Individually Addressed	-	-	-	-	-	-
Membership Benefit	-	-	-	-	-	-
Multi-Copy Same Addressee	-	-	-	-	-	-
Single Copy Sales	-	-	-	-	-	-
TOTAL QUALIFIED CIRCULATION	666	100.0	666	100.0	-	-

PUBLISHER'S AFFIDAVIT

We hereby make oath and say that all data set forth in this statement are true.
 Melissa Fromento, Group Publisher
 Marilyn Samuelsen, Circulation
 (At least one of the above signatures must be that of an officer of the publishing company or its authorized representative.)

IMPORTANT NOTE:

This unaudited circulation statement has been checked against the previous audit report. It will be included in the annual audit made by BPA Worldwide.

Date signed September 3, 2009
 State New York
 County New York City
 Received by BPA Worldwide September 3, 2009
 Type PSD
 ID Number M042Y0J9