

**BUSINESS PUBLICATION CIRCULATION STATEMENT
FOR THE 6 MONTH PERIOD ENDED DECEMBER 2006**
(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

FORUM FOR HEALTHCARE MEETINGS AND CONTINUING EDUCATION

Prism Business Media
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Tel. No.: (203) 358-9900
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Website:
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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 _____	54
Advertiser and Agency _____	1,541
Rotated or Occasional _____	1
Allocated for Trade Shows and Conventions _____	165
All Other _____	1,018
TOTAL	2,779

1. AVERAGE QUALIFIED CIRCULATION BREAKOUT FOR PERIOD						
QUALIFIED CIRCULATION	Total Qualified		Qualified Non-Paid		Qualified Paid	
	Copies	Percent	Copies	Percent	Copies	Percent
Individual _____	10,089	83.7	10,089	83.7	-	-
Sponsored Individually Addressed _____	-	-	-	-	-	-
Membership Benefit _____	1,967	16.3	1,967	16.3	-	-
Multi-Copy Same Addressee _____	-	-	-	-	-	-
Single Copy Sales _____	-	-	-	-	-	-
TOTAL QUALIFIED CIRCULATION	12,056	100.0	12,056	100.0	-	-

2. QUALIFIED CIRCULATION BY ISSUES WITH REMOVALS AND ADDITIONS FOR PERIOD											
2006 Issue	Number Removed	Number Added	Qualified Non-Paid	Qualified Paid	Total Qualified	2006 Issue	Number Removed	Number Added	Qualified Non-Paid	Qualified Paid	Total Qualified
July/August _____	564	604			12,040	November _____	3,852	3,830			12,000
September/October _____	255	237			12,022	December _____	534	698			12,164
						TOTAL	5,205	5,369			

3a. BUSINESS/OCCUPATIONAL BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF NOVEMBER 2006

This issue is 0.6% or 75 copies below the average of the other 3 issues reported in Paragraph two.

BUSINESS AND INDUSTRY	Total Qualified	Percent of Total	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)	Government Officials: (F)	Procurement Management: (G)	Others Related to the Field: (H)	
Associations (Medical or Scientific)												
International Medical or Scientific Association	570	4.8	570	322	46	72	32	83	1	10	4	
Foreign Medical or Scientific Association ____	302	2.5	302	218	42	21	9	1	-	10	1	
National Medical or Scientific Association ____	530	4.4	530	267	42	106	40	63	1	9	2	
Regional/State/County/Local Medical or Scientific Association_____	483	4.0	483	304	51	54	32	27	2	5	8	
Total Associations	1,885	15.7	1,885	1,111	181	253	113	174	4	34	15	
Hospitals/Medical Centers _____	944	7.9	944	536	102	50	169	32	6	30	19	
Pharmaceutical or Biomedical Equipment Manufacturer or Distributor _____	4,823	40.0	4,823	2,155	492	567	246	1,128	2	205	28	
Healthcare or Scientific Education Facility/Medical School _____	552	4.6	552	288	46	70	83	44	1	16	4	
Medical Education/ communication or marketing company_____	798	6.7	798	389	40	166	57	124	-	15	7	
Private Foundations (Healthcare or Scientific)	207	1.7	207	123	18	15	22	15	-	7	7	
Government Agencies (Healthcare or Scientific) _____	114	1.0	114	55	12	6	10	13	13	4	1	
Association Management Firms _____	103	0.9	103	61	7	19	3	9	-	3	1	
Independent Meeting Planning Companies _	478	4.0	478	275	3	125	9	42	-	4	20	
Tour Operator/ Travel agency _____	43	0.4	43	19	-	16	2	4	-	2	-	
Insurance organization (including but not limited to: managed care, health maintenance)_____	277	2.3	277	154	13	37	28	32	-	4	9	
Others Allied to the field _____	123	1.0	123	55	-	-	-	53	-	-	15	
Sub-total	10,347	86.2	10,347	5,221	914	1,324	742	1,670	26	324	126	
Percent	86.2	-	86.2	43.5	7.6	11.0	6.2	13.9	0.2	2.7	1.1	
Alliance for Continuing Medical Education Association Members _____	1,560	13.0	-									
Global Alliance for Medical Education _____	93	0.8	-									
TOTAL QUALIFIED CIRCULATION	12,000	100.0	10,347									

Note 1:

- (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
 (F) Government Officials
 (G) Independent Meeting Planner, Meeting Consultant
 (H) Others Related to the Field

SUPPLEMENTARY DATA FOR ISSUE OF NOVEMBER 2006

This is an analysis of the 10,347 respondents who indicated the types of Services/Facilities they use for their meetings and incentive travel programs. (See question #4 on the 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 services/facilities should not be added together as the total may exceed the total circulation. These data are presented for statistical and marketing purposes only.

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 _____	570	4.8	570	435	333	251	258	316	229	233	91	94	168	21
Foreign _____	302	2.5	302	56	44	58	60	41	38	29	41	40	35	20
National _____	530	4.4	530	393	275	239	272	279	227	180	44	68	144	20
Regional/State/County/Local _____	483	4.0	483	329	215	193	262	265	196	146	30	49	95	60
Total Associations	1,885	15.7	1,885	1,213	867	741	852	901	690	588	206	251	442	121
Hospitals/Medical Centers	552	4.6	552	307	227	200	246	300	197	128	40	33	125	74
Pharmaceutical or Bio- medical Equipment Manufacturer or Distributor	944	7.9	944	392	239	203	327	494	258	143	52	39	162	272
Healthcare or Scientific Education Facility/Medical School _____	4,823	40.0	4,823	3,158	2,264	2,147	2,601	2,913	2,405	1,854	476	490	1,776	549
Private Foundations (Healthcare or Scientific)	798	6.7	798	627	429	401	448	508	403	315	97	91	237	63
Insurance Companies _____	207	1.7	207	109	91	64	81	102	63	42	12	8	29	38
Government Agencies (Healthcare or Scientific)	114	1.0	114	56	29	34	49	48	34	25	9	7	20	47
Association Management Firms	103	0.9	103	75	55	45	51	70	50	33	15	15	35	7
Independent Meeting Planning Companies _____	478	4.0	478	400	354	296	323	325	279	233	124	144	216	22
Tour Operator/Travel Agency	43	0.4	43	31	35	23	23	23	26	25	17	14	21	2
Service Organization (inc., but not limited to, managed care, health maintenance, marketing/communications)	277	2.3	277	187	158	111	145	175	119	92	38	36	73	15
Others Allied to the Field	123	1.0	123	100	101	98	81	99	89	103	29	27	81	90
Sub-total	10,347	86.2	10,347	6,655	4,849	4,363	5,227	5,958	4,613	3,581	1,115	1,155	3,217	1,300
Percent	86.2	-	86.2	55.5	40.4	36.4	43.6	49.7	38.4	29.8	9.3	9.6	26.8	10.8
Alliance for Continuing Medical Education Association Members	1,560	13.0												
Global Alliance for Medical Education _____	93	0.8												
TOTAL QUALIFIED CIRCULATION	12,000	100.0												

3b. QUALIFICATION SOURCE BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF NOVEMBER 2006							
QUALIFICATION SOURCE	Qualified Within			Qualified Non-Paid	Qualified Paid	Total Qualified	Percent
	1 year	2 years	3 years				
I. TOTAL - Personal direct request from the recipient: _____	8,904	1,444	-			10,348	86.2
a. Written _____	534	-	-			534	4.5
b. Telecommunication _____	6,850	1,444	-			8,294	69.0
c. Electronic _____	1,520	-	-			1,520	12.7
II. TOTAL - Request from recipient's company: _____	-	-	-			-	-
a. Written _____	-	-	-			-	-
b. Telecommunication _____	-	-	-			-	-
c. Electronic _____	-	-	-			-	-
III. TOTAL - Membership Benefit: _____	1,652	-	-			1,652	13.8
a. Individual _____	1,652	-	-			1,652	13.8
b. Organizational _____	-	-	-			-	-
IV. TOTAL - Communication from recipient or recipient's company (other than request): _____	-	-	-			-	-
a. Written _____	-	-	-			-	-
b. Telecommunication _____	-	-	-			-	-
c. Electronic _____	-	-	-			-	-
V. TOTAL - Sources other than above (listed alphabetically): _____	-	-	-			-	-
Association rosters and directories _____	-	-	-			-	-
Business directories _____	-	-	-			-	-
Independent field reports _____	-	-	-			-	-
Licenseses - National, State or Local Government _____	-	-	-			-	-
Manufacturer's, distributor's and wholesaler's lists _____	-	-	-			-	-
Other sources _____	-	-	-			-	-
VI. TOTAL - Single Copy Sales: _____	-	-	-			-	-
TOTAL QUALIFIED CIRCULATION	10,556	1,444	-			12,000	100.0
PERCENT	88.0	12.0	-			100.0	-

Paid Source Information can be reported at the option of the publisher.

3c. MAILING ADDRESS BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF NOVEMBER 2006				
MAILING ADDRESS	Qualified Non-Paid	Qualified Paid	Total Qualified	Percent
Individuals by name and title and/or function _____			12,000	100.0
Individuals by name only _____			-	-
Titles or functions only _____			-	-
Company names only _____			-	-
Multi-Copy Same Addressee copies _____			-	-
Single Copy Sales _____			-	-
TOTAL QUALIFIED CIRCULATION			12,000	100.0

4. GEOGRAPHICAL BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF NOVEMBER 2006									
State & Zip Code	Qualified Non-Paid	Qualified Paid	Total Qualified	Percent	State & Zip Code	Qualified Non-Paid	Qualified Paid	Total Qualified	Percent
039-049 Maine _____			42		400-427 Kentucky _____			107	
030-038 New Hampshire _____			62		370-385 Tennessee _____			206	
050-059 Vermont _____			28		350-369 Alabama _____			114	
010-027 Massachusetts _____			522		386-397 Mississippi _____			48	
028-029 Rhode Island _____			35		EAST SO. CENTRAL			475	4.0
060-069 Connecticut _____			226		716-729 Arkansas _____			50	
NEW ENGLAND			915	7.6	700-714 Louisiana _____			92	
100-149 New York _____			1,028		730-749 Oklahoma _____			83	
070-089 New Jersey _____			1,122		750-799 Texas _____			634	
150-196 Pennsylvania _____			928		WEST SO. CENTRAL			859	7.2
MIDDLE ATLANTIC			3,078	25.6	590-599 Montana _____			21	
430-459 Ohio _____			356		832-838 Idaho _____			30	
460-479 Indiana _____			234		820-831 Wyoming _____			5	
600-629 Illinois _____			687		800-816 Colorado _____			186	
480-499 Michigan _____			188		870-884 New Mexico _____			21	
530-549 Wisconsin _____			201		850-865 Arizona _____			151	
EAST NO. CENTRAL			1,666	13.9	840-847 Utah _____			99	
550-567 Minnesota _____			266		889-898 Nevada _____			56	
500-528 Iowa _____			68		MOUNTAIN			569	4.7
630-658 Missouri _____			206		995-999 Alaska _____			6	
580-588 North Dakota _____			15		980-994 Washington _____			137	
570-577 South Dakota _____			14		970-979 Oregon _____			60	
680-693 Nebraska _____			55		900-961 California _____			1,202	
660-679 Kansas _____			119		967-968 Hawaii _____			19	
WEST NO. CENTRAL			743	6.2	PACIFIC			1,424	11.9
197-199 Delaware _____			53		UNITED STATES			11,859	98.8
206-219 Maryland _____			325		969 & 004-009			8	
200-205 Washington, DC _____			86		U.S. Territories _____			-	
220-246 Virginia _____			245		Canada _____			46	
247-268 West Virginia _____			50		Mexico _____			-	
270-289 North Carolina _____			333		Other International _____			85	
290-299 South Carolina _____			114		APO/FPO _____			2	
300-319 Georgia _____			322		TOTAL QUALIFIED CIRCULATION			12,000	100.0
320-349 Florida _____			602						
SOUTH ATLANTIC			2,130	17.7					

revised 10-03-06

Medical Meetings MASTER

FORUM FOR HEALTHCARE MEETINGS AND CONTINUING EDUCATION
A Prism Business Media Publication

Print Name _____
 Title _____
 Company _____
 Address _____
 City _____ State/Prov. _____
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► Do you wish to receive/continue to receive MEDICAL MEETINGS FREE? Yes No

Signature required _____ Print Name _____ Date _____

1 If Medical Meetings launches a digital edition in the future, would you like to receive your issues in this format rather than print?

- Yes
 No

2 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?

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

3 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) _____

4 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) _____

5 What types of SERVICES/FACILITIES do you use for your meetings and incentive travel programs? (check all that apply)

- 01 Resort
- 02 All-suite
- 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 _____

6 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

7 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 _____

8 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 _____

9 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

10 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

11 How much exhibit space (i.e. square feet) 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

Incomplete forms cannot be processed or acknowledged. The publisher reserves the right to serve only those individuals who meet the publication qualifications.

9. FIVE CALENDAR YEAR ANALYSIS: AVERAGE ANNUAL AUDITED QUALIFIED CIRCULATION AND CURRENT UNAUDITED CIRCULATION STATEMENTS					
	Audited Data	Audited Data	Audited Data	Audited Data	Circulation Claim
	2002	2003	2004	2005	*2006
Total Audit Average Qualified:	10,820	10,824	11,118	12,010	12,029
Qualified Non-Paid: _____	10,820	10,824	11,118	12,010	12,029
Qualified Paid: _____	-	-	-	-	-
Post Expire Copies included in Paid Circulation: _____	**NC	**NC	**NC	**NC	**NC
Average Annual Order Price: _____	**NC	**NC	**NC	**NC	**NC

***NOTE: 2006 data is unaudited.**

**NC = None Claimed

10. PAID CIRCULATION DATA	
**NC	Average Annual Subscription Order Price for the Period Required (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)

11. ADDITIONAL DATA

PARAGRAPHS 5 THROUGH 8 ARE NOT REQUIRED.

PUBLISHER'S AFFIDAVIT		
We hereby make oath and say that all data set forth in this statement are true.	Date signed	December 28, 2006
Melissa Fromento, Publisher	State	Connecticut
Len Roberto, Audience Marketing Director	County	Fairfield
(At least one of the above signatures must be that of an officer of the publishing company or its authorized representative.)	Received by BPA Worldwide	December 28, 2006
IMPORTANT NOTE:	Type	PSD
This unaudited circulation statement has been checked against the previous audit report. It will be included in the annual audit made by BPA Worldwide.	ID Number	M042S0D6