MAYO CLINIC

200 First St SW
Rochester, MN 55905
www.mayo.edu/cme

Dear Representative,

We are writing on behalf of Mayo Clinic and Mayo School of Continuous Professional Development to invite you to exhibit at our upcoming continuing education activity:

22nd Annual Daniel E. Waite Lectureship in Oral and Maxillofacial Surgery
April 14, 2012
Mayo Clinic, Rochester, Minnesota

This lecture is hosted by Mayo Clinic Division of Oral and Maxillofacial Surgery, Department of Surgery in collaboration with the University of Minnesota and the Minnesota Society of Oral and Maxillofacial Surgeons.

The guest speaker this year is Ghali E. Ghali, DDS, MD, FACS, the Jack Gamble Professor and Chair of Oral and Maxillofacial Surgery at LSU Shreveport. Dr. Ghali is a nationally-known clinician, researcher, and educator in OMS, and his scope of practice is un-rivaled within our specialty. His presentations encompass the breadth of the specialty, while targeting a wide range of practicioners. In addition, Dr. Ghali is Secretary/Treasurer of the American Board of Oral and Maxillofacial Surgery. Dr. Ghali is discussing topics relevant to the future of OMS.

We anticipate broad-based interest in Dr. Ghali's presentations from across our specialty and we expect approximately 160 practicing oral and maxillofacial surgeons and residents to attend.

The fee to exhibit at this course is $1,500.

If you are interested in participating, please return a signed letter of agreement (LOA) to confirm your participation by April 2, 2012. Payment may be completed by sending your check, made payable to Mayo Clinic, to ATTN: Julie Reed – Plummer 2-60, 200 First Street SW, Rochester, MN 55905. Please denote project number 2012R811 on your correspondence. The Mayo Clinic Tax ID number is 41-6011702.

This letter is an invitation to exhibit only. We are also accepting unrestricted educational grants in support of this activity.

For more information about this educational program or details about exhibit opportunities, please contact Julie Reed, CME Specialist, Continuous Professional Development, by e-mailing reed.julie1@mayo.edu or calling 507-266-2821.

Sincerely,

Christopher F. Viozzi DDS, MD
Chair
Division of Oral and Maxillofacial Surgery
Department of Surgery
Mayo Clinic

Kevin Arce DMD, MD, FACS
Residency Program Director
Division of Oral and Maxillofacial Surgery
Department of Surgery
Mayo Clinic

Additional course information can be found on the couse website: http://www.mayo.edu/cme/dental-specialties-2012r811

MAYO CLINIC

Mayo School of Continuous Professional Development

Exhibitor Agreement

Regarding the Terms and Conditions for a Commercial Exhibit

Activity Title 22nd Annual Daniel E. Waite Lectureship in Oral and Maxillofacial Surgery
Location Leighton Auditorium, Siebens Building, Mayo Clinic Date April 14, 2012

Agreement between: ACCREDITED PROVIDER (PROVIDER):
Mayo Clinic College of Medicine – Mayo School of CPD
AND

Commercial Company (EXHIBITOR): _____

Address: _____

Telephone _____ Fax _____ Email _____

The named EXHIBITOR wishes to exhibit at the above named activity for the amount of $1,500

TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org:
  SCS 4.2: "Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME." "Live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. **Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or in the place of the CME activity."**
- EXHIBITOR may distribute promotional materials at their exhibit space only. Distribution of pharmaceuticals or other samples is prohibited.
- All commercial support associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint sponsor, or any other party involved with the activity.
- Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.
- PROVIDER **Federal Tax ID number is 41-6011702**.
  Please remit check payable to: Mayo Clinic- Mayo School of CPD. Please identify name of course on the check stub.

AGREED

EXHIBITOR Representative: _____ _____
(Name) (Signature)

PROVIDER Representative: _____ _____
MSCPD (Signature)