



## FY 21-22 AHEC Media Request Form

Please refer to the Media Guidance Document  
for detailed instructions on submitting this form

|                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>AHEC Name:</b>                                                                                                                                                                                                                                                         | Keys AHEC                                                                                                                                                                                                                                                      |
| <b>Please indicate if this marketing initiative is one or more of the following:</b>                                                                                                                                                                                      | <b>Select one from the following:</b><br><input checked="" type="checkbox"/> Media Marketing <input type="checkbox"/> Social/Digital Marketing<br><input type="checkbox"/> Promo/Incentive <input type="checkbox"/> Cessation Materials                        |
| <b>Name of Marketing Creative(s) Being Used and Media Type:</b><br>(i.e. Virtual Group Quit – Print Ads)                                                                                                                                                                  | Group Quit – Group Schedule Flyer to E-Blast                                                                                                                                                                                                                   |
| <b>Will you be using a TFF file, producing it locally or does it need to be developed?</b><br><br><b>**A draft file must be included if local vendor will develop file</b><br><br><b>**For existing TFF files and customizations, a copy of the file must be included</b> | <b>Select one from the following:</b><br><input type="checkbox"/> Existing TFF File (from the Media Hub)<br><input checked="" type="checkbox"/> Produced Locally (by AHEC or Local Vendor)<br><input type="checkbox"/> Needs to be developed/customized by TFF |
| <b>Size or length of ad</b><br>(Half page ad, :30s spot, etc.):                                                                                                                                                                                                           | 8.5x11                                                                                                                                                                                                                                                         |
| <b>Target Audience:</b>                                                                                                                                                                                                                                                   | Healthcare providers who treat tobacco users who need help quitting and interested in Group Quit services.                                                                                                                                                     |
| <b>Expected Outcomes:</b>                                                                                                                                                                                                                                                 | Increase awareness of Group Quit services (primarily at the local level) in addition to increasing awareness of other TFF services.                                                                                                                            |
| <b>How long will the media run?</b><br>(Start Date, End Date, # of Ads, etc.):                                                                                                                                                                                            | Annually during FY21-22                                                                                                                                                                                                                                        |
| <b>Projected cost:</b>                                                                                                                                                                                                                                                    | E-Blast: \$0                                                                                                                                                                                                                                                   |

Please submit this form to: [AHEC@flhealth.gov](mailto:AHEC@flhealth.gov)

Do not submit this form to the Marketing Staff directly or to [TFFMedia@flhealth.gov](mailto:TFFMedia@flhealth.gov)

**\*\*Reminder: Please allow up to 10 business/working days for approval\*\***

### For Bureau of Tobacco Free Florida Use Only

AHEC Mailbox Approved ☒ TFF Media Approved ☒

Quote Submitted \_\_\_\_\_

Copy of ad, script or supplemental files submitted   X  

Purchase Request Form Submitted, if applicable \_\_\_\_\_

Event Justification Form, if applicable \_\_\_\_\_

Approval Signature:  \_\_\_\_\_ Date:   3/2/2022  

Comments: **This file is meant for Keys AHEC e-blast purposes only.**

#### In-Person Group Sessions



#### Virtual Group Sessions

## Quit tobacco with **Group Quit.**

There's never been a more  
important time to quit.

Sponsored by:



### News You Can Use:

Tobacco Free Florida's Group Quit sessions are now available through our **NEW** virtual sessions.

Same great program, now in virtual format to help smokers become tobacco free.

For Professional Online Educational Opportunities (CME/CE) for Healthcare Providers, See Our No Cost Tobacco Training Modules at:

[www.aheceducation.com](http://www.aheceducation.com)

View our Group Quit Participant Testimonials at:

[www.ahectobacco.com/about-us/testimonials](http://www.ahectobacco.com/about-us/testimonials)

### Benefits:

- **FREE** expert-led sessions.
- **FREE** nicotine replacement therapy such as patches, gum, or lozenges.\*  
\*If medically appropriate for those 18 years of age or older
- Covers all forms of tobacco.
- Develop your personalized quit plan.
- More than **DOUBLES** your chances of success.

For more information on Group Quit sessions, contact:

**1-877-848-6696**



**Florida  
HEALTH**

Learn more about all of  
Tobacco Free Florida's tools and services at  
[tobaccofreeflorida.com/quityourway](http://tobaccofreeflorida.com/quityourway)