

Sales Order

Advertiser **PROMO/PSA**
Agency

New / Revision **New**
Start Date **05/16/14**
End Date **07/01/14**
Month Type **Calendar**
Billing Cycle **Monthly**

Bill To **PROMO/PSA**
DONOT MAIL

Co-op No
Co-op Product
Notarized **N**
of Invoices **1**
Make Goods **Ask AE**
Income Type **Promo / PSA**
Local Income Type **Promo/PSA**
Competitive Code **Media Advt#164365**

Account
Executive **Jeff, KAM Slone**
Contract #
Estimate #
Description **PSA for Bluegrass State Games**
Stratus # **384263**
Special Instructions **Please send statements to:
Asher Agency
PO Box 2535
Fort Wayne, IN 46802**
Contact

Order Entered **05/15/14**

Schedule

#	Sponsor Log Name Revenue Types	Length Rate Line#	Start Date End Date	Start time End time	Auto Weekly	#/Wk	M	T	W	T	F	S	S	Total
1	PSA for Bluegrass State Games Promo / PSA / Promo/PSA	30 0.00 2570502	05/16/14 06/27/14 All Weeks	5:00AM 6:00AM	Y	1	X	X	X	X	X			0.00 7 Spots
2	PSA for Bluegrass State Games Promo / PSA / Promo/PSA	30 0.00 2570503	05/16/14 06/27/14 All Weeks	6:00AM 11:59PM	Y	5	X	X	X	X	X			0.00 35 Spots
3	PSA for Bluegrass State Games Promo / PSA / Promo/PSA	30 0.00 2570504	05/16/14 06/27/14 All Weeks	12:00AM 1:00AM	Y	1	X	X	X	X	X			0.00 7 Spots
4	PSA for Bluegrass State Games Promo / PSA / Promo/PSA	30 0.00 2570505	06/30/14 07/01/14 All Weeks	5:00AM 6:00AM	Y	3	X	X						0.00 3 Spots
5	PSA for Bluegrass State Games Promo / PSA / Promo/PSA	30 0.00 2570506	06/30/14 07/01/14 All Weeks	6:00AM 11:59PM	Y	5	X	X						0.00 5 Spots
6	PSA for Bluegrass State Games Promo / PSA / Promo/PSA	30 0.00 2570507	06/30/14 07/01/14 All Weeks	12:00AM 1:00AM	Y	3	X	X						0.00 3 Spots

May 14 = 0.00 Jun 14 = 0.00 Jul 14 = 0.00 Aug 14 = 0.00 Sep 14 = 0.00 Oct 14 = 0.00
Nov 14 = 0.00 Dec 14 = 0.00 Jan 15 = 0.00 Feb 15 = 0.00 Mar 15 = 0.00 Apr 15 = 0.00

Sales Order

Advertiser **PROMO/PSA**
Agency

New / Revision **New**
Start Date **06/24/14**
End Date **07/18/14**
Month Type **Calendar**
Billing Cycle **Monthly**

Bill To **PROMO/PSA**
DONOT MAIL

Co-op **No**
Co-op Product
Notarized **N**
of Invoices **1**
Make Goods **Ask AE**
Income Type **Promo / PSA**
Local Income Type **Promo/PSA**
Competitive Code **Media** Advt#**164365**

Account
Executive **Lexington House**
Contract #
Estimate #
Description **Coach Cal Fantasy Camp**
Stratus # **384914**
Special Instructions
Contact

Order Entered **06/18/14**

Schedule

#	Sponsor Log Name Revenue Types	Length Rate Line#	Start Date End Date	Start time End time	Auto Weekly	#/Wk	M	T	W	T	F	S	S	Total
1	PSA/Coach Cal Camp Promo / PSA / Promo/PSA	30 0.00 2583834	06/24/14 07/18/14 All Weeks	6:00AM 11:59PM	N		4	4	4	4	4	4	4	100 Spots

Jun 14 = 0.00	Jul 14 = 0.00	Aug 14 = 0.00	Sep 14 = 0.00	Oct 14 = 0.00	Nov 14 = 0.00
Dec 14 = 0.00	Jan 15 = 0.00	Feb 15 = 0.00	Mar 15 = 0.00	Apr 15 = 0.00	May 15 = 0.00

Total Contract Value: 0.00 Total Due: 0.00 100 Spots

Client Acceptance: _____ **Date:** _____

Account Executive: 6/18/2014 10:57:06 AM by Erin Stover

Sales / Market Manager: 6/18/2014 11:08:56 AM by Andrea Ayers

Business Manager: 6/18/2014 11:27:24 AM by Pam Blackburn

Traffic Manager: 6/18/2014 2:04:52 PM by Casey Fields

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ALL ORDERS SUBJECT TO THE STANDARD TERMS AND CONDITIONS ATTACHED HERETO