

Billing Adjustment Form

Station: WTAP

Advt. Name	REPUBLICAN SENATE CAMPAIGN COMM	Agency Name	MIDWEST COMMUNICATIONS AND MEDIA
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Refund:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Net Amount (combine totals for all invoices)	\$110.50
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Invoice #	xxx				
DR/CR	CR	<none>	<none>	<none>	<none>
Net Amount	\$110.50	\$0.00	\$0.00	\$0.00	\$0.00
Trans Type	<none>	<none>	<none>	<none>	<none>
Category	other	<none>	<none>	<none>	<none>
Comments	spot did not air due to technical issues contract 434672				

Approval:

General Manager/Date
(MUST HAVE GM'S SIGNATURE FOR BAD DEBT/WRITE-OFFS)

Sales Mgr/Date

A/E /Date

A/R Contact or Acct Mgr/Date