

Address all Invoices to the ADVERTISER in care of:

**YOUR AGENCY NAME**  
**123 E. MAIN ST.**  
**ANYWHERE, PA 12345**  
**(717) 555-1234**  
**www.wahoo.com**

MARKET: ANY METRO/NIELSEN PROJECTIONS  
 ADVERTISER: DEMO

STATION: **WAAA**  
 STATION REP: JOHN SMITH  
 PHONE #s: 717-555-1111 / 717-555-1234  
 EMAIL: **JSMITH@AAA.COM**

MEDIA BUYER: MARY JONES  
 PHONE: 555-244-5555 / FAX 555-244-5556  
 EMAIL: **MARY@WAHOO.COM**

<b>START DATE:</b>	<b>4-May-09</b>	<b>END DATE:</b>	<b>22-May-09</b>
<b>TOTAL WEEKS</b>		<b>TOTAL COMMERCIALS</b>	
3		27	

TV INSERTION ORDER	
DATE: 5-Apr-09 INSERTION ORDER #: M-5018	
PLEASE INCLUDE OUR INSERTION ORDER NUMBER ON ALL STATION INVOICES - THANK YOU!	
<input checked="" type="checkbox"/>	NEW ORDER
<input type="checkbox"/>	CANCEL
<input type="checkbox"/>	REPLACES & SUPERCEDES our Ins Order # dated

STATION	DAY(S)	TIME PERIOD	PROGRAM	RATE	RTG PTS	# SPOTS PER WEEK	TOTAL COST PER WEEK	SCHEDULE DATES
WAAA	M-F	7A-8A	GOOD MORNING AMERICA	\$ 200.00	2.1	3	\$ 600.00	MAY 4, 6, 8, 11, 13, 15, 18, 20, 22
WAAA	M-F	6P-7P	SAMPLE	\$ 650.00	5.6	2	\$ 1,300.00	
WAAA	WED	9P-10P	SAMPLE	\$ 2,500.00	13.2	1	\$ 2,500.00	
WAAA	M-F	11P-11:35P	SAMPLE	\$ 900.00	7.6	3	\$ 2,700.00	
						<b>9</b>	<b>\$ 7,100.00</b>	

**MEDIA GROSS:** \$21,300.00  
**DISCOUNT @ 15%:** \$3,195.00  
**NET DUE MEDIA:** **\$18,105.00**

**SPOT IDs / TITLES / RUN DATES:**  
 AA-124 :30 "NOW'S THE TIME" - MAY 4 THRU MAY 11  
 AA-125 :30 "DON'T MISS OUT" - MAY 13 THRU MAY 22

**INSTRUCTIONS:**  
 SYSTEM CONFIRMATION REQUIRED

All invoices must exactly match this insertion order and are to be sent, in duplicate, immediately following the end of the schedule. All invoices are to be in our hands by the 7th of the following month. All spots must receive a fair and equitable rotation. Deductions will be made for poorrotations and missing bonus or N/C spots.

**AGENCY NAME**, as Agent for the Advertiser named above, has been authorized by the Advertiser to initiate and administer media placements on their behalf. By executing this insertion order/schedule, this Station/Media Outlet recognizes **AGENCY NAME** as an Agent of the Advertiser and acknowledges that the Advertiser, is ultimately liable and responsible for any and all payments due this Station/Media Outlet regarding this Advertiser. **AGENCY NAME** acknowledges fiscal responsibility to the Station/Media Outlet only when, and to the degree, it has been paid by the Advertiser. **AGENCY NAME** will at all times use its best effort to ensure prompt payment and to assist the Station/Media Outlet in its collection efforts should the Advertiser become delinquent in its payment(s). The Station/Media Outlets not authorized to implement this insertion order/schedule until **AGENCY NAME** has received a signed copy acknowledging its receipt and acceptance of the conditions herein!

**PLEASE SIGN, DATE & RETURN A COPY OF THIS INSERTION ORDER/SCHEDULE ASAP. THANK YOU.**

STATION/MEDIA REPRESENTATIVE \_\_\_\_\_ Date

MEDIA BUYER \_\_\_\_\_ Date