

Traffic Scenarios – Scenario 5

Three weeks ago, you received a confirmation from Traffic for your Billing Only order. Now your client is ready to air the commercials.

Are the following filled out correctly?

Correct Broadcast Order is being used. Should indicate on top right hand corner Revised October 2016		
Correct market is selected		
Client Address: Complete company full name, mailing address including postal code		
Complete contact information: full name, phone numbers and email addresses		
Line Of Business: what type of business?		
Order # - should have confirmation # from original order		
Revision – checked Yes		
Start/End Dates		
Acct. Exec: sales reps name		
Campaign name: What is the campaign name – this will show up on all invoices		

Under Instructions section:

Run Dates (start of commercial run)		
# Wks: needs to be completed according to the broadcast calendar		
Number of # commercials indicated under which days of the week		
Times: Run times of the commercials		
Length – correct length for a commercial		
Drop down window has selection of types		
Occ: This will auto fill as long as #Wks column has a number in it and numbers under ‘days of the week’		

Under Details Of Billing and Other Instructions section:

Indicate if the order is complete or if this is only a portion of the order		
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My Broadcasting Corporation
"Ontario's Local
Broadcast Company"

Radio Broadcast Order

101.5 CKMO-FM - A Division of MBC

22 Mill St.
Orangeville, Ontario
L9W 2M3

Tel: 226-790-myfm (6936)
Fax: 0

Market
Orangeville

Order#:	12500-002
Date:	11-Jan-2017

Revision	YES
ENTER ORIGINAL ORDER # ABOVE	
Start Date:	March 1/17
Expiry Date:	April 30/17
Acct. Exec:	REPS NAME

Client:	Client's Name	Contact:	Full Name	Start Date:	March 1/17
Address:	Street Address	Phone:	Phone Number	Expiry Date:	April 30/17
	Town, Province	Fax:	Fax Number	Acct. Exec:	REPS NAME
	Postal Code	Email:	email address	Campaign:	
Line of Business:	Type Of Business	Inv. Email:	where is the invoice going?	Cash FX 2017	
New Client	NO	Detailed Billing	YES		
Prepayment Collected	NO	Co-Op	NO		

Instructions	# Wks	M	T	W	T	F	S	S	Times	Length	Desc.	Occ.	Spot Rate	Pkg. Price	Total Amount
6-Mar	2	3	3	3	3	3			6a-8p	:30	Spot	30			-
10-Apr	2	1	3	1	3	1	2	4	6a-8p	:30	Spot	30			-
										:30	Spot	0			-
										:30	Spot	0			-
										:30	Spot	0			-
										:30	Spot	0			-
										:30	Spot	0			-
										:30	Spot	0			-
										:30	Spot	0			-
												Total		Sub-Total	-
												60	13%	HST	-
Details of Billing and Other Instructions															
This order is now complete.															
Total															

Co-op Script

Terms: Net 30