

# REPORT ON PUBLICITY PROGRAMMES

(FOLLOW INSTRUCTION PRINTED)

NAME OF THE B.D.M. :-

CODE NO. :-

PLACE :-

PERIOD :-

SL. No.	Date/ Duration	Name of Distributor/ Dealer with Code No.	Programme Objectives	Type of Programme Standard/ Choice	Sanction No.	Expenses	Viewer Comments	Result (NC Booked)		Reasons of Less Achievement	Self Comments	Remarks
								Expected	Achieved			

MANAGER(Acctts.)

P.R.O.

ZONAL MANAGER

SIGNATURE OF THE B.D.M.