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**2022**

**MONTHLY REPORT**

**NCSA/PEP SPOTS AIRED**

**Louisiana Workforce Commission**

**REPORTING STATION CALL LETTERS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

***(Please submit a separate report for each station/duplicate this form, if necessary)***

**REPORT PREPARED/SUBMITTED BY:**  \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**EMAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY/STATE:** \_\_**ZIP:** \_ \_\_\_\_\_\_\_

**\*\*\* Were spots ‘streamed’ on station’s website? *(Circle One)*  YES NO**

**I certify that the above-named station aired spots for the LWC as follows:**

**November 2022**

 **MONTH # SPOTS AIRED VALUE OF SPOTS**

**November Totals: $**

**SIGNED:**  **Date:**