**PROPOSAL SUBMISSION FORM**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Legal Name of Organization | Name:  Website: | | | |
| Legal Name of other organization(s) if submitted as consortium | Name:  Website: | | | |
| Registration Status | Operational since: |  | Registration under: |  |
| Proposal Includes: | Agency profile ☐  Proposal Submission Form ☐  Media airing template ☐  Costs provided for all television channels and slots ☐  NTN, Sales Tax, SECP, PBA Certificates, all attached ☐ | | | |
| Proposed Project Director:  Key point of contact for professional correspondence | Name:  Designation:  Mobile Number:  Email Address: | | | |
| Annual Media Buying Turnover for TV only |  | | | |
| Top 5 Clients in the last one year | |  |  |  | | --- | --- | --- | | Client | Annual Volume | Working Since | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | | | |
| Name, Signature and Stamp of the Project Director |  | | | |