COMMUNICATIONS REGULATORY COMMISSION OF MONGOLIA

REPORT OF CABLE CHANNEL SERVICE PROVIDER FOR THE YEAR /HALF YEAR/ OF 20..

Name of Entity:
Registry number:
Province, city:
Soum, district:

Cable channel service provider entities shall fill and submit this form to CRC before 20 Feb of next year and 01 Aug.

Indicators		Row No.	Confidentiality level	Unit	Total	Explanation
1		2	3	4	5	6
I. FINANCIAL INDICATORS						
Statutory fund amount - Total		1	H1			
Of which: by ownership type	State owned	2				
	Private	3				
	Joint venture	4				
Total revenue		5	H1	1000 MNT		
Revenue from the selling of own products		6				
Revenue from advertisement		7				
Ordered or sponsored broadcasts		8				
Other revenue		9				
Total expense		10				
Investment made during this period	With own investment	11				
	With loan investment	12				
	With other sources	13				
	Total	14				
Revenue (tax) paid to the state budget	Social Insurance Fee	15	H2			
	Corporate Income Tax	16				
	VAT	17				
	Personal Income Tax	18				
	Customs Tax	19				
	Other taxes and fees	20				
	Total	21				
II. HUMAN RESOURCE INDICATORS						
Number of total employees		22				
Of which: by age	Up to 24	23				
	25-29	24				
	30-34	25				
	35-39	26				
	40-44	27				
	45-49	28				
	50-54	29				

	55 and more	30	H2	Number		
Of which: by sex	Male	31				
	Female	32				
Of which: by education	Elementary education	33				
	High school education	34				
	Elementary professional education	35				
	Diploma level, specialized high school education	36				
	Bachelor (or higher)	37				
Professional employees	Computer programer	38	H2	Number		
	Electronic engineer	39				
	IT, system engineer	40				
	Radio communication engineer	41				
	Electric communication engineer	42				
Of which: with prefix	Primer engineer	43				
	Consultant engineer	44				
	Qualified engineer	45				
Monthly average salary	Director, CEO	46	H1	MNT		
	Department manager	47				
	Engineer, technician	48				
	Economist, finance, accountant	49				
	Assistant	50				
	Service employee	51				
	Other	52				
	Monthly average salary of employees of the entity	53				

III. SERVICE INDICATORS

Total broadcasting time per day	54	H2	hour		
Total broadcasting time of the report period	55				
Total time of advertisement during the report period	56				

IV. SERVICE TARIFF

Advertisement tariff per minute /by appendix/	57	H2	MNT		
Ordered broadcast tariff /by appendix/	58				

V. INFORMATION ABOUT THE PRODUCTS

Own product, production /broadcast, documentary ... /		Number	59		Number		
		Total hour	60		hour		
Of which:	Broadcasts produces with the specialized direction	Number	61	H2	Number		
		Total hour	62		hour		

Broadcasts received from other studios or productions		Number	63		Number		
		Total hour	64		hour		
Of which:	Broadcast with intellectual property permission		65		Number		
Entities which provided advertisements		Times	66		hour		
		Total hour	67		Number		
Ordered or sponsored broadcasts		times	68		hour		
		Total hour	69		Number		
VI. TRANSMISSION							
Number of total connected CaTVs, connection type / by appendix/			70	H1			

H1 - To be used for the Regulatory Commission only. /Not to be disclosed to public/

H2 - To be used for developing annual communication market report.

***We declare that the information, reference and materials we provided on this form is complete and true. We hereby confirm that we understand that if the information, reference and materials provided on this form is false or incorrect, or incomplete, it'll become a reason to refuse to register or to revoke the license. We confirm that we made this report true and correct.

Prepared by::   /Job title, name, signature/

Reviewed and accepted by: /Job title, name, signature/

Tel:.....................   Fax:......................

Date: …. YYYY …. MM …. DD

Tariff of advertisement and ordered broadcast

No.	Type of advertisement and ordered broadcast	Period	Tariff per minute (MNT)	Total price (MNT)