

# DAILY NEWSPAPERS PUBLISHER'S CIRCULATION REPORT



MANDATORY

37 Front Street East, Suite 200, Toronto, Ontario M5E 1B3 Web site: www.circulationaudit.ca Phone: (416) 923-3567 or toll-free 1-877-305-2262 Fax: (416) 923-7206 E-mail: audit@newsmediacanada.ca

General Information   Report Type: Annual 3-Month Applied Reporting period: Report covers to   Interim 3-Month Interim (mm/yyyy)									
Name of publication									
Address									
Phone		Fax		E-Mail					
Publisher			Circulation Ma	anager					
Frequency of publication			Publication day	Su M	Tu W Th	F Sa			
1. Basic Subscripti Single copy price	on Prices (Do not inclu	ide GST)							
Within Trading Area	1 year		6 months		1 month				
Within Canada	1 year		6 months		1 month				
Outside Canada	1 year		6 months		1 month				
2. Circulation: (ch Type:	eck all that apply)								
Method:	Mail Carrier	Dealer		er & Street Boxes r Boxes	Other				
3. Distribution Area	as								
Using Form X.3 or equiva	alent, select an issue during the	e reporting period t	that is representative of y	our average circul	ation and list the towns	, cities,			
rural routes, etc., that rec	eive 25 or more copies, and the	e NET number of	copies distributed to eac	h place. Also list t	he number distributed	within the			
town or city of publication	l.								
	Issue sele	ected:	n/dd/yyyy						
A Coographia Bro		mr	n/dd/yyyy						
4. Geographic Brea	, list the NET number of copies	in each category	requested. The sum of	those figures should	d aqual the entry in				
	on), for that issue. Total circula			-	a equal the entry in				
					cluding community of r	nublication			
within the community of publication within the trading area, excluding community of publication within the province, but outside the trading area outside the province of publication, but inside Canada									
Outside and province, but outside the trading areaOutside the province of publication, but inside canada									
5. Returns and Spe	ecial Campaigns (attach a	separate sheet if	necessary)						
Were returns counted and deducted so that only net circulation is shown? No -25% deduction to columns L and M will apply Ses - Submit Form G for issue selected in #3 (controlled ci									
Did you offer any premiur	ns with subscription?		No	Yes - List pr	emiums:				
Did you offer any reduced	l rates?		No	No Yes - List rates:					
Did you offer any other in	centives?		No	Yes - List in	centives:				
Did you operate any subs	cription campaigns?		No	Yes - List ra	ites:				
Did your publication day(	s) change since your last repor	t?	No	Yes - List ch	nanges:				
Were there any publishin	g days when no issue was pub	lished?	No	Yes - List da	ates:				
distribution (10% differen	g days when you circulated ext ce from normal circ. for papers apers with over 10,000 circ.)?	-	No		ates and submit form Z				

# **Publisher's Circulation Report**

6. Distribution Summary	Paid Circulation									
First Quarter (first three months of six-month reporting period)	B. Mail	C. Carriers	D. Dealers	E. Third Party	F. Counter &	G. Other Paid	H. Electronic	I. Total Paid		
A. Date of issue No of pages					Bulk Sales	Street Box Sales			Circulation (B to H)	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
First-Quarter Totals (total of lines 1-13)										
Net Averages (First-Quarter Totals + # of issues)										
Second Quarter (Last three months of six-mont	repo	rting period)								
14										
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16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
Second-Quarter Totals (total of lines 14-26)										
Net Averages (Second-Quarter Totals + # of issues)										
			<u> </u>	1	I	I	I	I		
First-Quarter Results Totals										
Second-Quarter Results Totals										
Six-Month Results Totals (sum of 1st & 2nd Quarter results)	1									
Six-Month Average Circulation (six-month totals + # issues in six										
month period)	L									

GENERATED USING AUTOX VERSION 3.1 (2017/10)

## **Canadian Media Circulation Audit**

37 Front Street East, Suite 200, Toronto, Ontario M5E 1B3 Web site: www.circulationaudit.ca Phone: (416) 923-3567 or toll-free 1-877-305-2262 Fax: (416) 923-7206 E-mail: audit@newsmediacanada.ca

	Controlled Circulation								Extra Distribution					Press Run		
	J. Mail	K. Carriers	L. Dealers & Distributors	M. Counter & Street Box	N. Other Controlled	O. Electronic	P. Total Controlled Circulation (J to O)	Q. Total Circulation (I+P)	Sam	R. ervice & ple Copies	S. Total Distribution (Q+R)	T. Subscription Drives		U. Press Run		
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### 7. Publisher's Statement

We certify that all statements and data set forth in these documents are true and correct and in accordance with the Rules and Regulations of Canadian Media Circulation Audit, to the best of our knowledge. We certify that cash subscriptions have been received for all paid circulation claimed, and that our circulation records are maintained in an accounting

#### system approved by the CMCA program. Circulation Manager's Signature Publisher's Signature Date 8. Audit Checklist Publisher: Include supporting documentation for the entire audit period. Auditor: Check-mark boxes where documentation has been used to verify the figures claimed in each column of #6 - Distribution Summary. Record your comments and findings below. In addition to the information on this form, verify any issues not included but reported on form Z.1. PAID CIRCULATION Column B - Mailed (subscriptions) Column L - Dealers and Distributors Publisher's Statement of Mailing or Statement of Mailing with Canada Post a) List of dealers/distributors, with phone numbers. signature showing copies mailed and cash receipt for each issue b) List of net totals (Number of copies given of each issue published for six months. less returns - See form G) Column C - Carriers Column M - Street Boxes and Counter Pick-ups a) Draws, returns and net distribution for each carrier a) List of net total street box pick-ups (Number of copies given of b) Carrier Payroll: Total dollars divided by cost (cents per paper) each issue less returns - See form G) = number of papers delivered b) List of net total counter pick-ups (gross deposited on counter, less Column D - Dealers those not picked up = counter circulation - See form G) Dealer bill showing gross, returns, net and dollars collected. Column N - Other Column E - Third Party Bulk Sales Only one copy per individual/company may be claimed. To Letter stating bulk sales distribution. Must be signed and dated qualify as controlled circulation, documentation may include a list by publisher. showing name, address, phone numbers, for each Column F - Counter and Street Box Sales Publication Employees Agents Weekly cash collected / selling price = papers sold Correspondents/Reporters Advertisers Column G - Other Columnists/Editors (tearsheets) Only one copy per individual/company may be claimed. To Column O - Electronic qualify as paid circulation, documentation must include a list Submit a list of subscribers, contact information and e-mail addresses. showing name, address phone numbers, for each. Hard copies of written or e-mailed requests must be supplied to the auditor. **Publication Employees** Agents Column P - Total Controlled Circulation Correspondents/Reporters Sum of columns J through O. Advertisers (tearsheets) Columnists Column Q - Total Circulation Editors The sum of columns I and P. EXTRA DISTRIBUTION Column H - Electronic Only replica electronic editions in portable document format (PDF) Column R - Service and Sample Copies can be claimed. Documentation must include a list of subscribers. Submit a list containing the name of each individual/company contact information and e-mail addresses. Proof of payment may claimed in this column be requested by the Auditor. Sample promotion Office Column I - Total Paid Circulation Prospecting File (maximum 50) Sum of columns B through H. "Welcome Wagon' Complimentary CONTROLLED CIRCULATION \_Other (explain) Column J - Mailed Column S - Total Distribution Publisher's Statement of Mailing or Statement of Mailing with Canada Post Sum of columns Q and R. **Column T - Subscription Drives** signature showing copies mailed. Column K - Carriers List total. These copies are not included in the total distribution. a) List of supervisors and/or carriers, with phone numbers, plus PRESS RUN gross papers given to them to distribute weekly. Column U - Total Net Press Run b) List of net totals (Number of copies given of each issue less Printer's invoices showing number of copies printed and charged; or, if printed by the publisher, detailed press run certificate, signed (Form Y). returns - See form G) Auditor's Comments/Findings:

9. Canadian Media Circulation Audit Auditor's Statement and Verification

I have examined the circulation report of

for the reporting period from

\_\_\_\_\_. In my opinion, the report presents fairly the circulation of this newspaper. My examination included a general review of the circulation procedures and such tests of circulation records and other supporting evidence as checked above, which I considered necessary in the circumstances.

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