



**ASCAP, One Lincoln Plaza
New York, NY 10023**
Allen Alexander, Director
Symphonic Licensing
1-800-652-7227, #1, 3
(212) 873-3133 Fax
S&Clicensing@ascap.com

**2006/2007 REPORT OF ADJUSTED BOX OFFICE FOR SYMPHONY ORCHESTRAS WHICH
HAVE ANNUAL BUDGETS MORE THAN \$250,000**

This Report and Accompanying License Fee are due by October 1, 2006.

Please check here if there is a change of contact information, and indicate below.

I. Licensee Information

1. Licensee: _____
2. Orchestra: _____
3. Mailing Address: _____

4. Telephone: _____
5. Fax: _____
6. Email/Website: _____
7. Music Director: _____
8. Associate/Assistant Conductors: _____

9. Executive Director/General Manager: _____
10. Executive Director's E-mail: _____
11. Librarian: _____
12. Do you sponsor a Youth Orchestra? Yes No
*If the answer to Question 12 is Yes, Please complete; If No, Please skip
to Part II printed on the back of this form.*
 - 12a. Name of Youth Orchestra: _____
 - 12b. Address/Phone (If different) _____

 - 12c. Conductor: _____
 - 12d. Executive Director/Manager: _____

(Over)

II. Computation of License fee for 2006/2007 Season

1. Adjusted Box Office Receipts from 2005/2006 Season.

[Gross Box Office Receipts from concerts plus concert fees for all concerts during the preceding season (2005/2006), less specified exclusions as noted in Subparagraph 5(a) of the License Agreement.]

2. **License Fee Rate:** _____ **x .0095**

3. **Total License Fee Due:** _____
[line 1 multiplied by line 2]

Acct.#: **[Account Number]**
12OR, #2

Telephone:

Certification

I hereby certify that the foregoing Statement is true and correct as of this _____ day of _____, 2006.

(Orchestra)

By: _____
(Signature)

(Please print name.)

Name, Address, Telephone Changes	
Licensee:	_____
Orchestra:	_____
Address:	_____

	Contact
Name:	_____
Telephone: (_____)	_____