

# CONTRACT

Date: \_\_\_\_\_

**Business Name:** \_\_\_\_\_

Representative Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Web Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Underwriting Option:** \$ \_\_\_\_\_ Method of payment (circle): Cash / Check / CC

Amount paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Square: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ cvv code: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_

Billing Address: \_\_\_\_\_

Payment Plan due dates: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_

In exchange for your payment to KPTZ, we will acknowledge your support over the air with your announcement, constructed with the help of our underwriting team.

Number of spots: \_\_\_\_\_ Run: \_\_\_\_\_ Beginning Date: \_\_\_\_\_ End Date: \_\_\_\_\_

I understand that KPTZ will broadcast underwriter credit announcements in accordance with Federal Communications Commission regulations, acknowledging the underwriter's support of KPTZ. Announcements shall be consistent with the guidelines established by federal and state laws, and station guidelines and policies. All terms and conditions of the "Media Kit" are adopted in this Contract by this reference.

Signature of Business Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of KPTZ Representative: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_ The underwriter will provide a JPG logo file for and give KPTZ permission to display on our website, in our newsletter and in other KPTZ materials as a benefit to your business/organization and our online listening audience.

Thank you for making a *Sound Investment* with KPTZ by becoming a business underwriter!