

Houston Public Media Television Underwriting Agreement

This Agreement is entered into by and between the University of Houston ("University") on behalf of Houston Public Media, and _____ ("Underwriter").

Underwriter: Name: _____
Attention: _____
Address: _____
City, State, Zip: _____
Phone: _____

Program Name: _____

Schedule Days and Times: _____

Number of Spots: _____

Air Time: _____

Air Dates: _____

Cost per Spot: \$ _____

Total Amount from Underwriter: \$ _____

Underwriter will have the right to continue its support of this Program upon the final airdate. Due to University's commitment to serve the community as well as Underwriter, all dates and times of the Programs and re-runs are subject to change due to pre-emption or other unavoidable program schedule changes.

Underwriter will receive appropriate on-air credit for this underwriting as allowed by FCC rules and regulations, the Corporation for Public Broadcasting, the Public Broadcasting Service, and University. University prefers underwriting visuals to be provided on Digital Betacam, one inch or Betacam SP. Both the visual and audio portions of the credit are subject to prior approval by University, and should be provided ten (10) days before the effective start date of the scheduled broadcast of Underwriter announcement. At your request, University staff will meet with you to evaluate and develop any marketing strategies necessary to support and assist your involvement. Underwriter agrees to provide fourteen (14) days written notice to University should it desire to terminate this Agreement. Failure to do so will forfeit all amounts paid to University.

Payment is due 30 days from the date of invoice, with payment remitted to:

Houston Public Media
4343 Elgin Lobby
Houston, Texas 77204-0008

University reserves the right to cancel this agreement, and exercise all other rights and remedies as allowed by law, in the event payment is not made within 30 days.

UNIVERSITY OF HOUSTON

UNDERWRITER

Signature Date
Name: _____
Title: _____

Signature Date
Name: _____
Title: _____

Signature Date
Name: _____
Title: _____

Signature Date
Name: _____
Title: _____

Note: Modification of this Form requires approval of OGC