



# CONTRACT

## KPTZ On-Air Support Announcements

**Agreement Date:**

**Organization Name:**

**Representative Name:**

**Email:**

**Phone:**

**Web Address:**

**Mailing Address:**

**Contract Total \$**

**Type (select)                      Underwriting Spot / Nonprofit EPSA**

**Payment Method (select) Cash / Check / Credit Card\***

**Amount Paid: \$**

**Check #**

**Notes:**

**Number of spots:**

**Run Length:**

**Start Date:**

**End Date:**

In exchange for your payment, your support of KPTZ will be acknowledged in specified on-air announcements and simulcast via internet streaming. Agreement terms are executed upon Contract signing and payment; payment is due prior to implementation \*\* Contract is intended to serve as a billing notice. KPTZ will finalize and approve all message scripts to be in compliance with all legal and KPTZ station guidelines, and FCC regulations.

**Organization Representative Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**KPTZ Representative Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\*Credit card payments will be invoiced directly, to comply with Payment Card Industry (PCI) standards.

\*\*For convenience, monthly installment payments may be arranged by request.

**Thank you for making a *sound investment* by becoming a KPTZ underwriter!**

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