

PROGRAM BROADCAST AGREEMENT

New Client ___ New Order ___ Renew X Change ___ Cancel ___

Advertiser/Legal Entity HARVEY HYDE SHOW	Agency/Sponsor / Order No. _____		
Address 740 WEST ORANGE GROVE AVE.	Address		
City/State/Zip ARCADIA, CA. 91006	City/State/Zip		
Contact Name / Title HARVEY HYDE/OWNER-HOST	Contact Name / Title		
Contact Phone/Fax	Contact Phone/Fax/Email		
Contact Email / Cell Phone COACH.HYDE@EARTHLINK.NET	VISA ___ MC ___ AX ___	Approval Code	CID _____
	Name	Acct#	Exp

Category:

Show Name HARVEY HYDE SHOW **Contract Start** 12/27/21

Please use military time (00:00 – 24:00)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
					9PM-10PM	

Advertiser agrees to this number of 60-second avails per hour retained for the exclusive use of Station: ALL

Program Type	Political	Non-Bill	# Programs	Length (minutes)	Gross Rate (per)	Total Billing
SPORTS			52	60 MIN		

Program Delivered Via (check one):

LIVE STUDIO	LIVE REMOTE	POT/CODEC	SATELLITE	C D	WEB	FTP
X	X					

MONTHLY PROGRAM PAYMENTS ARE DUE THE FIRST WEEK OF EVERY MONTH!

Additional Information: 15x :15 show promos M-Su 6a-6a on KDWN. Streaming Ad's also M-Su 6a-10p

ADVERTISER AND AGENCY ARE JOINTLY AND SEVERALLY LIABLE FOR PERFORMANCE UNDER THIS AGREEMENT *Conditions & covenants on the reverse side are part of this Agreement. Advertiser & Agency acknowledge receipt of large-type version of such conditions, covenants and guarantees and agree to their terms. Permission for Station to broadcast in real-time the Internet audio streaming of the broadcast is acknowledged as part of this Agreement. This Agreement shall not become binding upon Station unless signed by its General Manager.*

Account Executive *Walter Beckett*

Date 11-19 **Advertiser** Harvey Hyde **Date** 11-19

General Manager _____

Date _____ **Representative (or Agency)** _____ **Date** _____

The Personal Guarantor whose signature appears below in order to induce Station to enter into and perform under the Broadcast Agreement, and in consideration thereof and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, personally guarantees, unconditionally, without waiver and all times, the payment when due of any and all indebtedness of advertiser/agency to Station and agrees, without reservation, to the terms of the guarantee expressed on the reverse side of this Agreement.

N WITNESS WHEREOF, this Guaranty has been duly executed by the undersigned on the day and year first above written.

Personal Guarantor _____
PRINTED NAME

LEGAL SIGNATURE

_____, a Notary Public in and for the State of Nevada hereby certify that on this _____ day of _____, 20____, the above named Personal Guarantor, known to me or properly identified to me, personally executed the above GUARANTY in my presence.

Signed and Sealed _____ **Notary Public** My Commission Expires _____