



Directors Guild of America  
 7920 Sunset Blvd.  
 Los Angeles, CA 90046  
 (310) 289-2000  
 RCForms@dga.org

## DIRECTOR DEAL MEMORANDUM TELEVISION and HIGH BUDGET SVOD PROGRAMS (per Sideletter No. 35 to BA)

Deal Memos must be submitted no later than commencement of services, pursuant to Basic Agreement Article 4-108 and Sideletter No. 35, and FLTTA Article 14, Section A.1. and 2.

This confirms our agreement to employ you to direct the project described as follows:

**DIRECTOR INFORMATION:**

Name: \_\_\_\_\_ SSN# (last 4 digits): \_\_\_\_\_  
 Loanout: \_\_\_\_\_ FID. #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Tel. #: \_\_\_\_\_  
 \_\_\_\_\_

Start Date (on or about): \_\_\_\_\_ Guaranteed Period: \_\_\_\_\_  Days  Weeks

Salary (U.S. Dollars): \$ \_\_\_\_\_  per Program  per Week  per Day

Additional Time: \$ \_\_\_\_\_  per Week  per Day

Check, if applicable:  Second Unit Director  Segment  Added Scenes/Retakes

Other Conditions (including credit above minimum): \_\_\_\_\_

**PROJECT INFORMATION:**

Project Title: \_\_\_\_\_

Episode #: \_\_\_\_\_ Episode/Segment Title: \_\_\_\_\_

Length of Television Program:  30 min  60 min  90 min  120 min  Other: \_\_\_\_\_

Length of High Budget SVOD Program:  20-35 min  36-65 min  66-95 min  96 min or more

Is this a Pilot?:  Yes  No

Produced Primarily for initial exhibition/availability:

A. Where. (Please check only one of the following boxes.)

- Network TV  Basic Cable  Home Video  
 Non-Network Free TV  Pay TV  High Budget SVOD (as defined in Sideletter No. 35 of BA)

B. When. (Complete this Subsection B. only for a picture made for initial Network TV, Non-Network Free TV, or Pay TV exhibition. Please check only one of the following boxes.)

- Prime Time  Non-Prime Time

Type of Program:  Multi-Camera  Single Camera

If High Budget SVOD Program, please also indicate name of platform for which program is made: \_\_\_\_\_

INDIVIDUAL having final cutting authority over the film is: \_\_\_\_\_

**ACCEPTED AND AGREED:**

**The Employee hereby authorizes the Employer to deduct from his or her salary the amount specified in the Directors Guild of America Basic Agreement as the Employee's contribution to the Directors Guild of America-Producer Pension Plan. The Employer will pay the amount so deducted directly to the Pension Plan on the Employee's behalf.**

THE UNDERSIGNED RESERVES THE RIGHT TO DISCHARGE THE EMPLOYEE AT ANY TIME SUBJECT ONLY TO THE OBLIGATION TO PAY THE BALANCE OF ANY COMPENSATION DUE, TO THE EXTENT REQUIRED BY THE DGA BASIC AGREEMENT TO WHICH THIS EMPLOYMENT IS SUBJECT.

Signatory Employer (Company Name): \_\_\_\_\_

Signatory Employer Representative Signature: \_\_\_\_\_

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

Employee Signature: \_\_\_\_\_

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