



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

DIRECTOR DEAL MEMORANDUM LIVE & TAPE

Deal Memos must be submitted no later than commencement of services, pursuant to 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. #: _____

 Salary (U.S. Dollars): \$ _____ per Show per Week per Day
 Additional Time: \$ _____ per Week per Day
 Start Date (on or about): _____ Guaranteed Period: _____ Days Weeks
 Additional Terms: _____

PROJECT INFORMATION:

Picture or Series Title: _____
 Episode #: _____ Episode Title: _____
 Length of Program: 30 min 60 min 90 min 120 min Other (specify length): _____
 If this is for Segment work, check here: Segment (specify length): _____ Is this a Pilot?: Yes No
 Produced Primarily for: Network or FBC Non-Network Basic Cable Pay TV Videodisc/Videocassette

Type of Show (check one from each box, as applicable):

<input type="checkbox"/> Dramatic (includes sitcoms, pilots and presentations)	<input type="checkbox"/> Series – <i>produced after February 10, 2002</i>	<input type="checkbox"/> High Budget	<input type="checkbox"/> Prime-time
<input type="checkbox"/> Quiz & Game	<input type="checkbox"/> Series – <i>produced prior to February 10, 2002</i>	<input type="checkbox"/> Low Budget	<input type="checkbox"/> Non-Prime-time
<input type="checkbox"/> Variety	<input type="checkbox"/> Special		
<input type="checkbox"/> Sports (specify event): _____	<input type="checkbox"/> Movie or Mini-Series		<input type="checkbox"/> Live Broadcast
<input type="checkbox"/> News & Commentary	<input type="checkbox"/> Strip - 5 per week		
<input type="checkbox"/> Local Freelance	<input type="checkbox"/> Other: _____		
<input type="checkbox"/> All Other			

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 Freelance Live and Tape Television 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.
 This employment is subject to the provisions of the Directors Guild of America, Inc., Freelance Live & Tape Television Agreement.

Signatory Employer (Company Name): _____
 Signatory Employer Representative Signature: _____
 Date: _____
 Employee Signature: _____
 Date: _____