



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: _____