

## 2008-2009 Snow Reporting Operations Log

Mountain News Corporation (MNC) agrees to deliver to \_\_\_\_\_ ready to-use snow reports as specified below.

<p><b>Stations that agree to air reports:</b></p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><b>Select Report Formats:</b></p> <p><input type="checkbox"/> MP3 file</p> <p><input type="checkbox"/> Studio Call In</p> <p><input type="checkbox"/> Interactive Phone System</p> <p><input type="checkbox"/> Podcast For Your Web Site</p>
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**On-Air Report Lengths:**

2X :60's    1X :90    4X :30

**Days you wish to receive & air snow reports**

Monday    Tuesday    Wednesday    Thursday    Friday    Saturday (Can also be used Sun)

- ➔ In exchange for the reports, Subscriber agrees to broadcast all reports delivered via MP3 or studio call in at least one time on days ordered. Subscriber to make reports delivered in Podcast format available on home page of station Web site.
- ➔ Maximum intro not to exceed 5 seconds.
- ➔ Auto Renew: Initial here \_\_\_\_\_ and this agreement automatically renews for the following season. Station will receive MNC service unless this agreement is canceled in writing before March 31 of any service year.

**Agreed to for Affiliate:**

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Agreed to for MNC**

**Signature:** \_\_\_\_\_

**Print Name:** RC Williams

**Title:** Senior Broadcast Producer

**Address:** 50 Vashell Way Ste. 400

**City, State:** Orinda, CA

**Zip:** 94563

**Phone:** 925.254.4456 x 112

**Fax:** 925.254.7923

**Email:** rcw@mountainnews.com

## Snow Reporting Feeding Details

Note: A separate sheet needs to be filled out for each set of feeds

Corporate Name: \_\_\_\_\_  
 Address, City, Zip: \_\_\_\_\_  
 Web Site: \_\_\_\_\_

### Business Contact

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

### Feeding Contact

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

### Feeding Details: Fill in applicable details

Email Address for MP3: \_\_\_\_\_  
 Phone# - Studio Call In: \_\_\_\_\_  
 Phone# - Interactive Phone: \_\_\_\_\_  
 Requested Feed Time: \_\_\_\_\_  
 Air Times: \_\_\_\_\_  
 Five Second Intro (Optional) \_\_\_\_\_

## Stations Broadcasting Reports

Call Letters: \_\_\_\_\_  
 AM or FM: \_\_\_\_\_  
 Dial Position: \_\_\_\_\_  
 Format: \_\_\_\_\_  
 City, State: \_\_\_\_\_  
 URL: \_\_\_\_\_

Call Letters: \_\_\_\_\_  
 AM or FM: \_\_\_\_\_  
 Dial Position: \_\_\_\_\_  
 Format: \_\_\_\_\_  
 City, State: \_\_\_\_\_  
 URL: \_\_\_\_\_

Call Letters: \_\_\_\_\_  
 AM or FM: \_\_\_\_\_  
 Dial Position: \_\_\_\_\_  
 Format: \_\_\_\_\_  
 City, State: \_\_\_\_\_  
 URL: \_\_\_\_\_

Call Letters: \_\_\_\_\_  
 AM or FM: \_\_\_\_\_  
 Dial Position: \_\_\_\_\_  
 Format: \_\_\_\_\_  
 City, State: \_\_\_\_\_  
 URL: \_\_\_\_\_

Call Letters: \_\_\_\_\_  
 AM or FM: \_\_\_\_\_  
 Dial Position: \_\_\_\_\_  
 Format: \_\_\_\_\_  
 City, State: \_\_\_\_\_  
 URL: \_\_\_\_\_

Call Letters: \_\_\_\_\_  
 AM or FM: \_\_\_\_\_  
 Dial Position: \_\_\_\_\_  
 Format: \_\_\_\_\_  
 City, State: \_\_\_\_\_  
 URL: \_\_\_\_\_