

Hillman Community Radio

WXHR LP – 103.5 FM

121 W 2nd St, PO Box 256
Hillman, MI 49746
Studio Line: 989-742-2781
Business Line: 989-742-2782

Underwriting Guidelines and Agreement for Individuals

Hillman Community Radio 103.5 WXHR LP-FM is listener supported. We depend on listener support to keep us 'on the air'.

Hillman Community Radio offers the individual supporter two categories of underwriting on WXHR-LP-FM, Hillman, Michigan's first Low Power FM Radio Station. WXHR LP is licensed by the F.C.C. and all underwriting messages must comply with Federal Regulations.

Supporters (Sponsors): Supporters are individuals who privately contribute \$10.00 or more. This entitles the supporter to a minimum of 3 'on-air' announcements each day for one month. If a supporter contributes \$100.00 per year, when paid in advance, we will air their support acknowledgments for the last two months at no additional cost (which is a savings of \$20.00). In other words, support for 10 months in advance and receive 12 months of acknowledgment.

Donors: This category is for any amount that a listener wishes to contribute to WXHR LP-FM that is not covered by the other three types of support or for those who want to help WXHR LP-FM but want to remain anonymous. Any amount would be graciously appreciated!

General items applicable:

- Donations and Underwriting Support are/is non-refundable.
- There will be at least three daily 'on-air' announcements of support.
- Hillman Community Radio is a non-profit Michigan corporation that holds the FCC license for WXHR LP-FM. We are restricted by the F.C.C. to be 'non-commercial'.
- Individual supporter's names will be mentioned 'on-air', combined with other individual supporters and each message will play a minimum of three times per day throughout the term of support.
- Credits on WXHR LP-FM Radio are intended as a way of thanking and identifying underwriters.
- Tax Deductibility: WXHR LP-FM is a 501(C)(3) corporation. Contributions to WXHR LP-FM are *tax deductible*. Consult your tax preparer.

Individual Name: _____

Address: _____

City or Village, State, Zip: _____

Phone: _____

Web Address, email if Applicable: _____

Payment Options:

Category:

Monthly

One Year

Individual Supporter ___ Months X \$10 = _____ \$100

Donor Any amount appreciated \$ _____

Preferred contribution method:

Cash Check

Terms of Agreement Accepted:

Supporter Signature

Date

On Air Name (Print)

Remain Anonymous

Print and fill out form.

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DBA- Hillman Community Radio

*Thank You for your support!
Any amount of support is very much appreciated.*