## CABLECAST REQUEST

This form must be completed and submitted with properly identified tape(s).

Progran Title			
Progran	n Length (in minu	tes)	
This pro	ogram is:	a special	part of a series
lf a seri	es, how often will	a new episode be provideo	?
Produce	٩r		
Auures			
Phone #			
Sponso	ring Organization		
NOTE: The information above must also appear on the tape and the case			
Format program is being submitted on:			
Are end credits included Yes No			
Special notes:			
NOTE: T	the-spot coverage unscripted perform scheduled cableca DVD. *PCTV does not ac accepted.	/Ds of programs to be cableca of bona fide news worthy eve mances) must be submitted to st. Programs may be submitt ccept masters of programs for	ast, along with a program description(except on- ents, and live spontaneous, unrehearsed, o the PCTV staff at least one week before the ed on digital tape, 3/4" videotape Beta, or on a cablecast. Good quality dubs <u>only</u> will be s damaged or lost in the mail or while in the
	possession of the		
Producer's Signature			Date
Date received by PCTVDate returned by PCTV		eturned by PCTV	
Authori	zed PCTV Signatı	ire	
revised 2/09			