

WealthTV Launch Authorization Form

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Herring Broadcasting Company Inc, dba WealthTV, 4757 Morena Blvd, San Diego, CA 92117

AFFILIATE INFORMATION (PLEASE USE EXCEL OR TYPE)	
MSO Name:	
DBA (If different than above)	
System ID Name:	
Communities Served (Names)	
Communities Zip Codes	
Street Address:	
City:	
State / Zip:	
System General Manager:	
Phone #	
Headend Address:	
Headend City / State:	
Headend Serial #	
System Engineer:	
Phone #	
Marketing Contact:	
Training Contact:	

HOMES PASSED		<i>Required</i>
LIFE LINE BASIC		<i>Required</i>
EXPANDED BASIC		<i>Required</i>
DIGITAL BASIC		<i>Required</i>
TOTAL HD SUBS		<i>Required</i>
HD BASIC		<i>Required</i>
HD TIER		<i>Required</i>
OTHER:		<i>Required</i>

WEALTHTV INTERNAL USE ONLY	
Authorized on:	_____
Authorized by:	_____
Affiliate Relations Approved:	
Signed	_____

LAUNCH INFORMATION

CHANNEL NUMBER	PROGRAMMING SERVICE	SUBS	LAUNCH DATE	NAME OF TIER	IRD MFG & MODEL	IRD AUTHORIZATION NUMBER (16 NUMBERS LONG)
	WealthTV (Digital)					
	WealthTV in HD					

The undersigned represents, warrants and agrees that he/she is fully authorized to execute and complete this authorization form and that all of the information contained in this form is complete, accurate, true and correct to the best of his/her knowledge.

Signature (Required)

Print Name:

Title:

Date: