



Confirmation of Agency of Record

Cox Media may rely conclusively upon notice from the Agency to take any and all actions on Client's behalf without investigation or direct authorization from Client.

(Client's Name)

(Agency's Name)

Section A

Confirmation of Agency Financial Liability for Advertising Payment

Agency hereby unconditionally and absolutely guarantees the full and punctual payment of any amounts due and payable by Client to Cox Media ("Payment Obligations"). Agency agrees that it will immediately pay any payment obligations upon Cox Media's demand, without any requirement that Cox Media seek payment from Client.

The obligations of Agency under this guaranty are irrevocable, unconditional and absolute and will not be discharged or otherwise affected by (i) any extension, renewal, settlement, compromise, or waiver of any Payment Obligations, or any security therefore, or (ii) any change in the structure, ownership or constitutive documents of the Agency or Client, or any insolvency, bankruptcy, reorganization or similar proceeding affecting either of them. If at any time payment of any of the Payment Obligations is rescinded or otherwise must be restored or returned upon Client's insolvency, bankruptcy, reorganization or otherwise, Agency's obligations hereunder with respect to such payment shall be reinstated at such time as though such payment has not been made. All services provided by Cox Media are subject to the terms and conditions set forth at <http://coxmedia.com/terms-conditions> (the "Cox Media Ts&Cs"). The Cox Media Ts&Cs are subject to change from time to time. Agency acknowledges receipt of, has read, and agrees to and accepts Cox Media Ts&Cs by signing this guaranty and/or by receiving the services Cox Media provides.

Agency **ACCEPTS** financial responsibility

[AGENCY]
Signature: _____
Name: _____
Title: _____

[CLIENT]
Signature: _____
Name: _____
Title: _____

COX MEDIA, LLC

Signature: _____
Name: _____
Title: _____

Section B

Agency **DOES NOT** accept financial responsibility

[AGENCY]
Signature: _____
Name: _____
Title: _____

[CLIENT]
Signature: _____
Name: _____
Title: _____

COX MEDIA, LLC

Signature: _____
Name: _____
Title: _____

Once completed fax to 404-269-3299
Or send via email to CFC_ClientSupport@coxmedia.com