

\_\_\_\_\_  
Performer Name – PLEASE PRINT

\_\_\_\_\_  
SS # or performer ID #

\_\_\_\_\_  
Date

Dear \_\_\_\_\_:  
(Name of Agency)

I am writing to inform you that I wish to terminate my Standard AFTRA Agency  
Contract dated \_\_\_\_\_ as of \_\_\_\_\_.  
(Contract Date<sup>1</sup>) (Date of termination)

I am citing (CHOOSE ONE) as the reason for termination:

- Paragraph 5 of Exhibit C<sup>2</sup>
- Paragraph 5a of Exhibit C-1<sup>3</sup>

Sincerely,

\_\_\_\_\_  
Performer's signature

**CC: AFTRA National (fax 212-686-4925) or Los Angeles Local office (fax 323-634-8190)**

\_\_\_\_\_  
<sup>1</sup> The Contract Date or Term of the AFTRA Agency contract can be found in Paragraph 2 of Exhibit C or Exhibit C1

<sup>2</sup> Exhibit C is the Standard AFTRA Exclusive Agency Contract Under Rule 12C

<sup>3</sup> Exhibit C1 is the Standard AFTRA Commercial Exclusive Agency Contract Under Rule 12C