

<Insert name and logo of Accredited Provider>

WRITTEN AGREEMENT FOR COMMERCIAL SUPPORT

<Insert Accredited Provider Name> is committed to presenting CME activities that promote improvements or quality in healthcare and are independent of the control of commercial interests. As part of this commitment, **<insert Accredited Provider Name>** has outlined in this written agreement the terms, conditions, and purposes of commercial support for its CME activities. Commercial Support is defined as financial, or in-kind, contributions given by a commercial interestⁱ, which is used to pay all or part of the costs of a CME activity.

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|---|-----------------------------------|-----------------------------------|---------------------|
| Title of CME Activity | | | |
| Activity Location | | Activity Date | |
| Name of Commercial Interest | | | |
| Amount of Educational Grant (direct or in-kind) | | | |
| Grant will be used for the following: | | | |
| Speaker Honoraria | Speaker Expenses (itemize) | Meeting Expenses (itemize) | Other (list) |

Disclosure

9. **The Accredited Provider will ensure that the source of support from the Commercial Interest, either direct or “in-kind,” is disclosed to the participants, in program brochures, syllabi, and other program materials, and at the time of the activity. This disclosure will not include the use of a trade name or a product-group message. The acknowledgment of commercial support may state the name, mission, and clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product promotional in nature.**

The Commercial Supporter and [REDACTED]