POLITICAL AGREEMENT FORM - CANDIDATE

1. Emily teck hompson, hereby request station time as follows:	
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE	
SIAI	E OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCKS MUST BE COMPLETED	
Candidate name:	
Mike hehoe	
Authorized committee:	
Citizens to Elect Mike Kehoe	
Agency requesting time (and contact information):	
INA Thompson Communications, Inc	
Candidate's political party:	·
+ sepublican	
Office sought (no acronyms or abbreviations):	
GOVERN DY	
Date of election: Aug U - 2024	General
Treasurer of candidate's authorized committee:	
Charlie Kruse	
The undersigned represents that:	
(1) the payment for the broadcast time requested has been furnished by (check one box below):	
the candidate listed above who is a legally qualified candidate, or	
the authorized committee of the legally qualified candidate listed above;	
(2) this station is authorized to announce the time as paid for by such person or entity; and	
(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices.	
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.	
Candidate/Committee/Agency	Station Representative
Signature: The K	Signature:
Name: Emily Peck	Name:
Date of Request to Purchase Ad Time: 7 77 2) 1	Date of Station Agreement to Sell Time:

Federal Candidate Certification: The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer to an opposing candidate or, if it does, (2) contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds and a simultaneously displayed printed statement identifying the candidate, that the candidate approved the broadcast and that the candidate and/or the candidate's authorized committee paid for the broadcast or if radio programming, contains a personal audio statement by the candidate that identifies the candidate, the office being sought and that the candidate has approved the broadcast.	
Candidate/Authorized Committee/Agency	
Signature: Signature: Signature: LISA PODOLONIU	
Date:	
TO BE COMPLETED BY STATION ONLY	
Ad submitted to Station? Yes No	
Date ad received:	
Federal candidate certification signed (above): Yes No N/A	
Disposition:	
Accepted	
Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*	
Rejected – provide reason (optional):	
Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):	
Contract #: Station Call Letters: LTVI KPLIC Date Received/Requested:	
Station Location: St. LDING Run Start and End Dates:	
Upload (1) this form, (2) the order, and (3) the invoice	
immediately to the station's FCC Political File.	