CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and ch	arges. See Invoice for actual schedule and charges. hereby request station time as follows:
IDENTIFY CANDIDATE TYPE	FEDERAL CANDIDATE STATE OR LOCAL CANDIDATE
ALL QUESTIONS/B	LOCKS MUST BE COMPLETED
Candidate name: Deb Fischer	
Authorized committee: Deb Fischer for U.S. Senate	
Agency requesting time (and contact information): N/A	
Candidate's political party: Republican	
Office sought (no acronyms or abbreviations): United States Senate	
Date of election: May 14th, 2024	General ✓ Primary
Treasurer of candidate's authorized committee: James Watts	
and other sales practices.	ified candidate, or d candidate listed above;
Candidate/Committee/Agency	Station Representative
Signature: //o/	Signature: Wonna Ellis
Name: Derek Oden	Monna Ellis Name: Donna Ellis
Date of Request to Purchase Ad Time: 3/13/24	Date of Station Agreement to Sell Time: 3-9-20

The undersigned hereby certifies that th	e broadcast matter to be aired pursu	ant to this disclosure either (1) does not refer
to an opposing candidate or, if it does, (if for a duration of at least four seconds an the candidate approved the broadcast a	 contains a clearly identifiable photen a a simultaneously displayed printed and that the candidate and/or the car tains a personal audio statement by the 	ograph or similar image of the candidate I statement identifying the candidate, that Ididate's authorized committee paid for the the candidate that identifies the candidate,
Candidate/Authorized Committee/		
Signature:		
Name: Derek Od	len	
Date: 3/13/24		
ΤC	D BE COMPLETED BY STATIO	N ONLY
Ad submitted to Station? Ye	s No	
Date ad received: 3 25-	24	
Federal candidate certification signed (a	bove): Yes I	No NVA
Disposition:		
Accepted		
	y not yet received to determine spon	sor ID)*
Rejected – provide reason (option	onal):	
*Upload partially accepted form, then pr	omptly upload updated final form wh	nen complete.
*Upload partially accepted form, then produced and nature of follow-ups, if any (e.g.		nen complete.
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, · · · · · · · · · · · · · · · · · · ·		Date Received/Requested:
Date and nature of follow-ups, if any (e.g Contract #:	Station Call Letters: Station Location:	Date Received/Requested: 3/9/8/024 Run Start and End Dates:
Date and nature of follow-ups, if any (e.g. Contract #: 30209034 Est. #: Upload order, this form and invoice (or truse this space to document schedule of the purchased or attach separately. If station of a contact person who can provide that	Station Call Letters: Station Location: Station Location: Station Location: Station Location: Station Location: Station Location: Will not upload the actual times spot	Date Received/Requested:
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