



date: 2-26-24 new order:

supersedes contract #: _____

start date: 2-27-24 end date: 3-5-24

FM

time order

advertiser: Mike Causey NC. Ins. Comm.

agency: _____

address: _____

city/state/zip: _____

contact person: Mike Causey

telephone: 336-210-1947

log listing: _____

competing products: _____

package/program: _____

agency commission: _____% co-op

sales person: _____ s.s. # _____ commission: _____

rep/rep office: _____ rep/rep office #: _____

notes to traffic & accounting: _____

check one:

announcement

sponsorship

political

public service

promotional

check one:

remit invoice

cash in advance

check one:

stand broadcast mo.

calendar month

check one:

end of flight

weekly invoice

monthly invoice

special cycle

describe: _____

options for make good

check one:

same flight

same week

extend schedule

dollar for dollar

credit

ask salesperson

contract #: 40173

account #: 57824

cart #: 1480

income account: _____

check one:

agency

direct

check one:

local

regional

national

check one:

cash

trade

non-commercial

<p>production</p> <p><input type="checkbox"/> new</p> <p><input type="checkbox"/> no change</p> <p><input type="checkbox"/> change</p> <p><input type="checkbox"/> form attached</p>	<p>continuity</p> <p><input type="checkbox"/> new</p> <p><input type="checkbox"/> no change</p> <p><input type="checkbox"/> change rotation</p> <p><input type="checkbox"/> form attached</p>
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dates to run	len	hours to run (daypart)	m	t	w	t	f	s	s	x	rate	#/wk	\$/wk	\$ total
<u>2/27-3/5</u>	<u>:60</u>	<u>6a-7p</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>		<u>\$24.00</u>			
jan	feb	mar	apr	may										
july	aug	sep	oct	nov	dec								total	<u>1,920.00</u>

advertiser _____ salesperson _____ approved by: _____

date _____ date _____ entered by: gc 2-26-24



WIFM AGREEMENT & INQUIRY FORM FOR POLITICAL BROADCASTS

- PERSONAL CONTACT
 PHONE CONTACT

DATE: 2-26-24

I, Mike Causey on behalf of Mike Causey Campaign
 () a legally qualified candidate of the Republican political party for the office of Commissioner of Insurance in the
 upcoming () primary () general () election to be held on
March 5, 2024
 () Third Party Political Advertiser (no acronyms permitted)
 do hereby request () station time () rate/avails inquiry only as follows:

LENGTH B'CAST	TIME OF DAY ROTATION	DAYS	CLASS OF TIME	TIMES PER WEEK	NUMBER OF WEEKS	RATE
:60	6a-7p	8	Political	80	1	24.00

DATE OF FIRST BROADCAST: 2-27-24

DATE OF LAST BROADCAST: 3-5-24

TOTAL CHARGES: \$ 1,920.00

The broadcast time will be used by Mike Causey Campaign for Ins. Comm.. Payment for the above has been furnished by Mike Causey Campaign (must match name on check). You are hereby authorized to announce the time as paid for by such person and entity. The entity furnishing payment for this order, if other than an individual person, Chief Executive Officers, Members of the Executive Committee, or Members of the Board of Directors are as follows: (list names and titles)

CAMPAIGN TREASURER Collin McMichael, CPA
 ADDRESS PO Box 97696 CITY Raleigh ST NC ZIP 27624
 TELEPHONE (336) 210 1947 FAX (for disclosure statements) ()

THIRD PARTY ISSUE ADVERTISERS - IDENTIFY ALL NATIONAL ISSUES ADDRESSED IN THE AD, INCLUDING ANY FEDERAL ELECTIONS OR FEDERAL CANDIDATES:

() INDEPENDENT COMMITTEES, PACS, ADVOCACY GROUPS, OR OTHER NON-CANDIDATES:

I agree to indemnify and hold harmless the station from any damages or liability, including reasonable attorneys fees that may ensue from the performance of the above-stated broadcast. For the above-stated broadcasts, I also agree to prepare a script or tape, which will be delivered to the station at least 48 hours before the time of the scheduled broadcasts.

() NON - FEDERAL CANDIDATES: (as per North Carolina law)

The purchase of the time described herein is controlled, approved or authorized by the candidate of his/her authorized committee.

() ALL BUYERS:

The station has disclosed to me its political advertising policies, including: applicable classes and rates, and discount, promotional and other sales practices. Disclosure Statement was () fax () mailed () hand-delivered

DATE 2-26-24 CANDIDATE OR AGENT [Signature]
 ACCEPTED () REJECTED () HANDLED BY Jennifer Chalkin TITLE GM

ATTENTION STATION STAFF: Attach order confirmation and copy of check (on orders), then place all orders or inquiries in the Public File under "Political", filed by candidate, as soon as possible. Add invoices as soon as available. Attach documentation for any make-goods or refunds to this form, including exact dates, times, dollar amounts and reasons for adjustments to the original order.