

## CANDIDATE ADVERTISEMENT AGREEMENT FORM

See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

I, Jason Lehosit, hereby request station time as follows:

**IDENTIFY CANDIDATE TYPE**

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

### ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Phil McGrane

Authorized committee:

McGrane for Idaho

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

Secretary of State

Date of election:

May 17, 2022

General

Primary

Treasurer of candidate's authorized committee:

Maxine Bell

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 (not applicable to federal candidates).

**THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.**

**Candidate/Committee/Agency**

Signature:



Name: Jason Lehosit

Date of Request to Purchase Ad Time:

**Station Representative**

Signature:

Name:

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:

Name:

Date:

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?  Yes  No Date ad received: \_\_\_\_\_

**Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).**

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: \_\_\_\_\_

\*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):

Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPIF or use this space to document schedule of time purchased, when spots actually aired, the rates charged and the classes of time purchased or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPIF.

# Sales Order

Stations: KICR-KIBR-FM, KSPT-KBFI-AM Agency: THE AGENCY CREATIVE NETWORK  
 Contract Name: McGrane Campaign Address: 9201 GRANDMASON  
 Contract#: 778419244 City: EAGLE State: ID Zip: 83816  
 Start Date: 5/10/22 End Date: 5/16/22 Phone: (208) 602-2534  
 Revenue Type: REGIONAL AGENCY Buyer: Kelly Amos  
 Advertiser: PHIL MCGRANE Tax Schedule: (None)  
 Address: \_\_\_\_\_ Billing Cycle: Calendar  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Salesperson: 1275tmur Comm %: 15  
 Product Name: McGrane Campaign 22 Makegood Policy: Within Contract Dates  
 Comp. Code: POLITICAL  
 Sec. Comp.: REPUBLICAN PARTY

### KICR-KIBR-FM

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION								RATE	TOTALS		PTY	
	START	END		START	END		M	T	W	T	F	SA	SU	Per Wk		D/W	SPOTS		\$\$
1	5/10/22	5/16/22		6:00 AM	7:00 PM	30	8	8	8	8	8	5	5	50	D	29.41	50	1,470.50	3

TOTAL GROSS \$1,470.50, NET \$1,249.92

### KSPT-KBFI-AM

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION								RATE	TOTALS		PTY	
	START	END		START	END		M	T	W	T	F	SA	SU	Per Wk		D/W	SPOTS		\$\$
1	5/10/22	5/16/22		6:00 AM	7:00 PM	30	8	8	8	8	8			40	D	21.18	40	847.20	3

TOTAL GROSS \$847.20, NET \$720.12

Billing Projections: By Month

May 22  
 CA 2,317.70  
 ST 2,317.70

Print Spot Prices

TOTAL SPOTS ..... 90  
 GROSS TOTAL \$ ..... 2,317.70  
 ADJUSTED SPOTS ..... 90  
 ADJUSTED TOTAL \$ ..... 2,317.70

APPROVE    DECLINE  
     1275dben, 05/06/22 @12:39PM  
     Sales Manager  
     Business Manager  
     Traffic Manager

\* Sent to the traffic system by 1275dben, 05/06/22 @12:39PM