

KTCM UPLOADED

LORI
ROOK
5/14-6/16/24



Political Broadcast Agreement Form for Candidate Advertisements (PB-19)

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: 5/13/24

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):

*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 #: <u>45163</u>	Station Call Letters: <u>KTCM</u>	Date Received/Requested: <u>5/13/24</u>
Est. #: <u>513614</u>	Station Location: <u>MADISON MO</u>	Run Start and End Dates: <u>5/13-6/16/24</u>

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.

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Strategic Media Placement, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE 

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

LORI ROOK

Authorized committee:

LORI ROOK FOR MISSOURI

Agency requesting time (and contact information):

N/A Strategic Media Placement

Candidate's political party:

REPUBLICAN

Office sought (no acronyms or abbreviations):

MISSOURI STATE TREASURER

Date of election:

AUGUST 6, 2024

General

Primary

Treasurer of candidate's authorized committee:

RYAN ROOK, TREASURER

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

Signature:

A BRANT FINK

Digitally signed by A BRANT FINK
Date: 2024.04.08 09:46:29 -04'00'

Name: BRANT FINK

Date of Request to Purchase Ad Time: 20240510

Station Representative

Signature:



Name:

BOB DAKIN

Date of Station Agreement to Sell Time:

5/13/24

Sales Order

Station: KTCM-FM Agency: KATZ MEDIA GROUP (EI)
 Contract Name: Lori Rook for MO KTCM-01 Address: Attn: ACCOUNTS PAYABLE
 Contract#: 45163 125 W 55TH ST. 3RD FL
 Start Date: 5/13/24 End Date: 6/16/24 City: NEW YORK State: NY Zip: 10019
 Revenue Type: POLITICAL NATIONAL Type: Cash Buyer: _____
 Advertiser: Lori Rook For Missouri (A) Tax Schedule: _____ (None)
 Address: _____ Agency Commission %: 15
 City: _____ State: _____ Zip: _____ Billing Cycle: Standard
 Product Name: Rook for Missouri Salesperson: 1999KPHIL Comm %: 0
 Estimate #: 513614 Makegood Policy: Within Contract Dates
 Agency Client Code: na
 Competitive Code: POLITICAL-CANDIDATE

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	5/13/24	5/19/24		6:00 AM	10:00 AM	60	1		1		1			3	D	23.54	3	70.62	1	
2	5/13/24	5/19/24		6:00 AM	10:00 AM	60						1		1	D	23.54	1	23.54	1	
3	5/13/24	5/19/24		6:00 AM	10:00 AM	60						1		1	D	23.54	1	23.54	1	
4	5/13/24	5/26/24		10:00 AM	3:00 PM	60		1		1				2	D	20.50	4	82.00	1	
5	5/13/24	5/19/24		3:00 PM	7:00 PM	60	1	1	1	1				4	D	23.54	4	94.16	1	
6	5/13/24	5/19/24		3:00 PM	7:00 PM	60						1		1	D	23.54	1	23.54	1	
7	5/13/24	5/19/24		3:00 PM	7:00 PM	60						1		1	D	23.54	1	23.54	1	
8	5/20/24	5/26/24		6:00 AM	10:00 AM	60	1		1	1	1			4	D	23.54	4	94.16	1	
9	5/20/24	5/26/24		3:00 PM	7:00 PM	60	1	1	1					3	D	23.54	3	70.62	1	
10	6/03/24	6/16/24		6:00 AM	10:00 AM	60	1		1	1	1			4	D	23.54	8	188.32	1	
11	6/03/24	6/09/24		6:00 AM	10:00 AM	60						1		1	D	23.54	1	23.54	1	
12	6/03/24	6/09/24		6:00 AM	10:00 AM	60						1		1	D	23.54	1	23.54	1	
13	6/03/24	6/16/24		10:00 AM	3:00 PM	60		1		1				2	D	20.50	4	82.00	1	
14	6/03/24	6/16/24		3:00 PM	7:00 PM	60	1	1	1	1				4	D	23.54	8	188.32	1	
15	6/03/24	6/09/24		3:00 PM	7:00 PM	60						1		1	D	23.54	1	23.54	1	
16	6/03/24	6/09/24		3:00 PM	7:00 PM	60						1		1	D	23.54	1	23.54	1	

Billing Projections: By Month

	May 24	Jun 24
CA	505.72	552.80
ST	505.72	552.80

Print Spot Prices

TOTAL SPOTS 46
 GROSS TOTAL \$ 1,058.52
 ADJUSTED SPOTS 46
 ADJUSTED TOTAL \$ 1,058.52

APPROVE DECLINE

- General Manager
- Sales Manager
- National Sales Manager
- Local Sales Manager