

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

**FEDERAL CANDIDATE**

**STATE/LOCAL CANDIDATE**

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

<b>Station and Location:</b> KUBA and KKCX, 1479 Sanborn Road, Yuba City, Ca 95993	<b>Date:</b> 10/28/22
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I, Grace Espindola,

being/on behalf of: Myself,

a legally qualified candidate of the N/A

political party for the office of: City Council

in the General

election to be held on: November 8, 2022

**do hereby request station time as follows:**

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
:30	6A-9A and 3P-7P	Monday through Sunday	N/A	Varies	2

**Attach proposed schedule with charges (if available):**

I represent that the payment for the above described broadcast time has been furnished by:

Paid for by Grace Spindel VC Council

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Grace Spindel-Trujillo, EA

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

**To Be Signed By Candidate or Authorized Committee**

10/31/22

Date

[Signature]

Signature

**To Be Signed By Station Representative**

Accepted

Accepted in Part

Rejected

Signature

Printed Name

Title

**MEDIA SERVICES ORDER**

Today's Date 10.28.22

**RESULTS RADIO**

New Account    Contract # \_\_\_\_\_ Acct # \_\_\_\_\_  
 New Order    Client Name Grace Espindola for Yuba City Council  
 Revision    Agency \_\_\_\_\_  
 Cancellation    Address \_\_\_\_\_

Est #/PO # \_\_\_\_\_  
 Product Code: \_\_\_\_\_  
 Campaign Name: \_\_\_\_\_  
 Inv/Co-Op Desc: \_\_\_\_\_  
 Sales Pkg Name: \_\_\_\_\_

Calendar Month Bill  
 Broadcast Month Bill

Acct Mgr Robyn Harlan    City/State/Zip \_\_\_\_\_  
 Contact \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_  
 Email \_\_\_\_\_

Direct     Airtime    AP EN    Talent (Circle one)  
 Agency     Non-Spot     Network  
 National     Display     Tech Fees  
 Political     Streaming     Hard Cost

Cash  
 Trade  
 Notarize Invoice  
 Notarize Script

Station  KCCL     KCEZ     KNCQ     KKXS  
 KKCY     KBQB     KHRD  
 KMJE     KRQR     KEWB    Results  
 KUBA     KTHU     KESR    Radio

Prepay (Amt/Ck #): \_\_\_\_\_  
 Special Instructions/Comments: \_\_\_\_\_

Line Item #	Program	Spot/Snrsr/Pkg	Start Date	End Date	Daypart	Len	Rate	M	T	W	Th	F	Sa	Su	M thru Su Total	Sp per Total wk	Total # of Weeks	Total # of Spots	Total \$
1	KKCY		11.1.22	11.6.22	6A-9A	:30	17.00	3	3	3	3	3	3	3	18	1	1	18	\$ 306.00
2	KKCY		11.1.22	11.6.22	3P-7P	:30	16.00	3	3	3	3	3	3	3	18	1	1	18	\$ 288.00
3	KKCY		11.7.22	11.8.22	6A-9A	:30	17.00	3	3						6	1	1	6	\$ 102.00
4	KKCY		11.7.22	11.8.22	3P-7P	:30	16.00	2							2	1	1	2	\$ 32.00
5																			\$ -
6																			\$ -
7	KUBA		11.1.22	11.6.22	6A-9A	:30	14.00	3	3	3	3	3	3	3	18	1	1	18	\$ 252.00
8	KUBA		11.1.22	11.6.22	3P-7P	:30	13.00	3	3	3	3	3	3	3	18	1	1	18	\$ 234.00
9	KUBA		11.7.22	11.8.22	6A-9A	:30	14.00	3	3						6	1	1	6	\$ 84.00
10	KUBA		11.7.22	11.8.22	3P-7P	:30	13.00	2							2	1	1	2	\$ 26.00

Total # of Spots **88**  
 Gross \$ 1,324.00  
 Agency Fee \$ -  
 Net \$ 1,324.00

Acknowledgement: This is a contract to purchase Media Services. CLIENT hereby agrees to pay for delivered services upon receipt of invoice and understands and agrees to the Contract Conditions presented with this contract.

Accepted By Client or appointed agent: *[Signature]*    Date 10/31/22

Print Name \_\_\_\_\_    Date \_\_\_\_\_  
 Acct Manager Signature \_\_\_\_\_    Station Approval Signature \_\_\_\_\_  
 Client Authorized Signature \_\_\_\_\_    Date \_\_\_\_\_

Jan \$ \_\_\_\_\_    Apr \$ \_\_\_\_\_    Jul \$ \_\_\_\_\_    Oct \$ \_\_\_\_\_  
 Feb \$ \_\_\_\_\_    May \$ \_\_\_\_\_    Aug \$ \_\_\_\_\_    Nov \$ \_\_\_\_\_  
 Mar \$ \_\_\_\_\_    Jun \$ \_\_\_\_\_    Sep \$ \_\_\_\_\_    Dec \$ \_\_\_\_\_