

Oct 12, 18
 CONT# 32248469 Mod# Ver# 1 (Last =)
 REP EASTMAN
 TO WOCN-FM (CAPE COD MA)
 FM BRENDA DEATON
 OFF DALLAS
 AGY HULSEN MEDIA SERVICES LLC - HULS
 ADDR 2400 LARAMIE TRAIL
 AUSTIN, TX 78749

DDS CONT# 0
 C/P/E: CESP / ISSU / 1894

SALESPERSON FAX#

PH #

BYR KRISTIN BLACK
 ADV COMMITTEE TO ENSURE SAFE PATIENT CARE
 PDT Issue
 FLT Oct 22, 18 - Nov 04, 18

* REP ORDER COMMENT *

** 10/12/2018 10:18:00 AM: NEW ORDER - PLEASE CONFIRM ONLINE OR BY EMAIL AT:
 TYLER.LARRABEE@KATZRADIOGROUP.COM WITHIN 24 HOURS. THANKS!

MC	LN	DAYS	TIME	LEN	EFFECTIVE DATES	# OF Day	NPD	RATE	TOT SPTS
		FLIGHT 1							
	1.1	.T....	6A - 10A	60	10/23/2018 - 10/23/2018	1D	2	\$59.00	2
	1.2	.T....	10A - 3P	60	10/23/2018 - 10/23/2018	1D	2	\$59.00	2
			** FLIGHT TOTALS **				4	\$236.00	
		FLIGHT 2							
	2.1	..W....	6A - 10A	60	10/24/2018 - 10/24/2018	1D	2	\$59.00	2
	2.2	..W....	10A - 3P	60	10/24/2018 - 10/24/2018	1D	2	\$59.00	2
			** FLIGHT TOTALS **				4	\$236.00	
		FLIGHT 3							
	3.1	...T...	6A - 10A	60	10/25/2018 - 10/25/2018	1D	2	\$59.00	2
	3.2	...T...	10A - 3P	60	10/25/2018 - 10/25/2018	1D	2	\$59.00	2
			** FLIGHT TOTALS **				4	\$236.00	
		FLIGHT 4							
	4.1F..	6A - 10A	60	10/26/2018 - 10/26/2018	1D	2	\$59.00	2
	4.2F..	10A - 3P	60	10/26/2018 - 10/26/2018	1D	2	\$59.00	2
			** FLIGHT TOTALS **				4	\$236.00	
		FLIGHT 5							
	5.1	M.....	6A - 10A	60	10/29/2018 - 10/29/2018	1D	2	\$59.00	2
	5.2	M.....	10A - 3P	60	10/29/2018 - 10/29/2018	1D	2	\$59.00	2
			** FLIGHT TOTALS **				4	\$236.00	

Broadcast Contract

HULSEN MEDIA SERV LLC - HULS
 COMM TO ENSURE SAFE PT CARE
 2400 LARAMIE TRAIL
 AUSTIN, TX 78745

Start Date 10/22/18	Contract# 1505083439	Mod# 0
End Date 11/04/18	Date Entered 10/12/18	Date Last Modified 10/12/18
Advertiser COMM TO ENSURE SAFE		Station Market WOCN-FM
Product Issue		SalesRep/Office Dallas Eastman

Attn: Kristin Black

Standard Billing Cycle Estimate# 1894

LN	DATE	TIMES/PROGRAMS	LEN	MO	TU	WE	TH	FR	SA	SU	SPOTS /WK	RATE
1	MO 10/22/18 SU 10/28/18	06:00A-10:00A	60	--	2	2	2	2	--	--	8	\$59.00
2	MO 10/22/18 SU 10/28/18	10:00A-03:00P	60	--	2	2	2	2	--	--	8	\$59.00
3	MO 10/29/18 SU 11/04/18	06:00A-10:00A	60	2	--	--	--	--	--	--	2	\$59.00
4	MO 10/29/18 SU 11/04/18	10:00A-03:00P	60	2	--	--	--	--	--	--	2	\$59.00

-----Additional Comments-----	Total Spots	Spots Total\$	Agency Commission	Net	Gross
	20	1,180.00	\$177.00	\$ 1,003.00	\$ 1,180.00


Billing Projections: By Month

	Oct 18	Nov 18
CA	1,180.00	
ST	944.00	236.00

Cape Cod Broadcasting does not discriminate in advertising contracts on the basis of race or ethnicity. Any provision in any order or agreement for advertising that purports to discriminate is hereby rejected.

Accepted for Station

Accepted for advertiser OR agency(and MBS, if any) as agent for the advertiser


 Name _____ Title GSM

Name _____ Title _____

See reverse for accepted terms and conditions, if any

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: 737 West Main St 104.7 WOCN-FM Hyannis MA 02601	Date: 10/12/18
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I, **HMS**

do hereby request station time concerning the following issue:

Limit the number of patients a nurse has to care for

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

This broadcast time will be used by: Committee to Ensure Safe Patient Care

**THIS PAGE MUST BE COMPLETED FOR PROGRAMMING THAT
"COMMUNICATES A POLITICAL MATTER OF NATIONAL IMPORTANCE."
FOR ALL OTHER ISSUE ADS, PLEASE GO TO PAGE 3.**

Programming that "communicates a political matter of national importance" includes (1) references to legally qualified candidates (presidential, vice presidential or congressional); (2) any election to Federal office (e.g., any references to "our next senator", "our person in Washington" or "the President"); and (3) a national legislative issue of public importance (e.g., Affordable Care Act, revising the IRS tax code, federal gun control or any federal legislation).

Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"

Yes No

For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the offices being sought, the date(s) of the election(s) and/or the issue to which the communication refers (if applicable):

[Empty box for candidate and issue information]

I represent that the payment for the above described broadcast time has been furnished by (name and address):

[Empty box for sponsor name and address]

and you are authorized to announce the time as paid for by such person or entity (hereinafter referred to as the "sponsor").

List the chief executive officers or members of the executive committee or the board of directors below (or attach separately):

[Empty box for executive officers or board members]

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 5)

**THIS PAGE MUST BE COMPLETED FOR PROGRAMMING THAT
DOES NOT "COMMUNICATE A POLITICAL MATTER OF NATIONAL
IMPORTANCE"**

I represent that the payment for the above described broadcast time has been furnished by (name and address):

Committee to Ensure Safe Patient Care
340 Turnpike Street, Canton, MA 02021
781-830-5730

and you are authorized to announce the time as paid for by such person or entity (hereinafter referred to as the "sponsor").

List the chief executive officers or members of the executive committee or the board of directors below (or attach separately):

Donna Kelly-Williams, Chairman; Julie Pinkham, Officer; Andrew Ferris, Treasures

TO BE COMPLETED FOR ALL ISSUE ADVERTISEMENTS

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

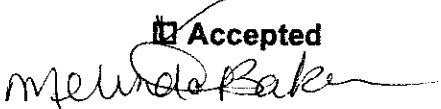
The Sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), the sponsor also agrees to prepare a script, transcript, or tape, which will be delivered to the station at least _____ before the time of the scheduled broadcasts.

TO BE SIGNED BY ISSUE ADVERTISER (SPONSOR)

5/21/18  512 827 3408
Date Signature Contact Phone Number

TO BE SIGNED BY STATION REPRESENTATIVE

Accepted Accepted in Part Rejected

 Melinda Baker GSM
Signature Printed Name Title