Orders	Order / Rev: Alt Order #:	723323	723323					
	Product Desc:	Miami Dade County Commissioner-	/ote					
	Estimate:	District 1		WSBS				
	Flight Dates:	11/16/23 - 11/26/23	Primary AE:	Laura Duque				
	Original Date / Rev:	11/15/23 / 11/15/23	Sales Office:	MLOC				
	Order Type:	GENERAL	Sales Region:	Local				
Agency	Name:	Dark Horse Strategies						
	Buying Contact:		Billing Type:	Cash				
	Billing Contact:		Billing Calendar:	Broadcast				
		3663 SW 8th St #204b	Billing Cycle:	EOM/EOC				
		Miami, FL 33135	Agency Commission:	15%				
Advertiser	Name:	Miguel Gabela Campaign						
	Demographic:	A35+	New Business End:					
	Product Codes:	PL1 - Candidates	Advertiser External ID:					
	Revenue Code 1:	AGY	Agency External ID:					
	Revenue Code 2:	POL	Unit Code:	General				
	Revenue Code 3:	CAND	Order Separation:	00:10:00				
	Priority:	P-3	<u> </u>					
Bill Plan			Totals					
Start Date	End Date # Spots	Gross Amount Net Amount	Month # Spots	Gross Amount Net Amount Rating				
10/30/23	11/20/23 8	\$4,450.00 \$3,782.50	November 2023					
			Totals 8	\$4,450.00 \$3,782.50 0.00				

Account Executives

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Laura Duque	ML OC	Local	Start Of Order - End Of Order	100%

Ln	Ch	Start	End	Inventory Code	Break	Start/End	Time Days	Len Sp	ots	Rate Pri	Rtg Type	Spots	Amount
N 1	22	11/18/2	3 11/18/23	8p-10p Sat. TOMAS REGALADO	CM O	8PM-10PM (8:00 PM-10	-SATUF1- D:00 PM)	:30	1	\$350.00P-2	0.00 NM	1	\$350.00
We	<u>Sta</u> ek: 11/	<u>rt Date</u> /13/23	End Date 11/19/23	<u>Weekdays</u> <u>S</u> 1-	oots/Week 1	<u>Rate</u> \$350.00	Rating 0.00						
N 2	22	11/19/2	3 11/19/23	8P-9P Sun TOMAS REGALADO	CM O	8PM-9PM-9: (8:00 PM-9:	SUNDA1 00 PM)	:30	1	\$350.00P-2	0.00 NM	1	\$350.00
We	<u>Sta</u> ek: 11/	<u>rt Date</u> /13/23	End Date 11/19/23	<u>Weekdays</u> <u>S</u>	oots/Week 1	<u>Rate</u> \$350.00	Rating 0.00						
N 4	22	11/16/2	3 11/20/23	8P-9P AHORA CON OSCA	CM AR HAZA	8PM-9PM-I (8:00 PM-9:	MO-TU-111 00 PM)	:30	3	\$650.00P-1	0.00 NM	3	\$1,950.00
	Sta ek: 11/ ek: 11/		End Date 11/19/23 11/26/23	<u>Weekdays</u> <u>S</u> 11 1	oots/Week 2 1	<u>Rate</u> \$650.00 \$650.00	Rating 0.00 0.00						
N 5	22	11/16/2	3 11/20/23	9P-10P M-F BAYLY	СМ	9PM-10PM (9:00 PM-10	-MO-Tl111 0:00 PM)	:30	3	\$600.00P-1	0.00 NM	3	\$1,800.00
	<u>Sta</u> ek: 11/ ek: 11/		End Date 11/19/23 11/26/23	<u>Weekdays</u> <u>S</u> 11 1	oots/Week 2 1	<u>Rate</u> \$600.00 \$600.00	Rating 0.00 0.00						
	,					+					Tatala		¢4.450.00



Telephone:



Start Date: 11/16/2023 End Date: 11/20/2023

Station Contact: Laura Duque

(cell): 305-606-7957

Station: WS85

http://www.scanishbroadcasting.com/paymentcenter.

		The second second	DAY	PART	PARTY CHIEF SHE	JOYAL	Street, Square, Square,	-	Section 1	200	Name of				_	
_	Note	Spot Type	START TIME	END TIME	RATE	SPOTS	LENGTH	M	TU	20.00	TH	7	TA	10	-74	STAL SY
			-							_	_					
	Saturday	1. Regalado Sat	Bo	10pm	\$ 350.00	1	:30	-				-	1		5	35077
	Sunday	1. Regalado	80	9pm	\$ 350.00	1	:30							N.	3	390.00
	Thursday - Monday	O. Haza	8pm	9pm	\$ 650.00	3	:30	1			1	1	-		3	1,950.00
	Thursday - Monday	Bayly	9pm	10pm	\$ 600.00		:30	1			1	1			\$	1,800.00
-		Weekly				8		2	0	0	2	2	1	1	3	4,450.00
				70	TAL SPOTS						1000		WEEKLY	TOTAL	5	4,450.00
-					OF WEEKS								**********	TOTAL		4,450.00

3722.04

Sign and fax back within 5 business days

Payment Method: Check #: Date: Amount: Credit Card. Station Credit

Spanish Broadcasting System * 7007 N.W. 77th Ave. Miami, Ft 33146 * 788-394-9200

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. Emiliano Antunez I,	See Invoice for actual schedule and charges, hereby request station time as follows:
IDENTIFY CANDIDATE TYPE	ERAL CANDIDATE E OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED
Candidate name: Higuel Gabela	
A II I I I I I I I	Cupiga
Agency requesting time (and contact information):	
NIA DARK Horse S	testegies
Candidate's political party:	Non Partisen Election
Office sought (no acronyms or abbreviations):	
Date of election: 11/21/2023	General Primary
Treasurer of candidate's authorized committee:	
Jose Strichez Grant	1111
The undersigned represents that:	
(1) the payment for the broadcast time requested has been fur	nished by (check one box below):
the candidate listed above who is a legally qualified car	ndidate, or
the authorized committee of the legally qualified candi	date listed above;
(2) this station is authorized to announce the time as paid for b	y such person or entity; and
(3) this station has disclosed its political advertising policies, inc	9 11
and other sales practices (not applicable to federal candida	tes).
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY
Candidate/Committee/Agency	Station Representative
Signature: Dade Honse Startegies	Signature:
Name: En // AND Anton	Name: Laura Duque
Date of Request to Purchase Ad Time: ////o/2013	Date of Station Agreement to Sell Time: 11/15/23

to an opposing candidate or, if it do for a duration of at least four second the candidate approved the broadca broadcast or if radio programming,	at the broadcast matter to be aired pur es, (2) contains a clearly identifiable ph s and a simultaneously displayed print est and that the candidate and/or the c	resuant to this disclosure either (1) does not refer otograph or similar image of the candidate ed statement identifying the candidate, that andidate's authorized committee paid for the the candidate that identifies the candidate, t.
Candidate/Authorized Committ	ee/Agency	
Signature:		
Name:		
Date:	Wilder Tool Code A Social Section (Code Code Code Code Code Code Code Code	
The state of the s	TO BE COMPLETED BY STATI	ON ONLY
Ad submitted to Station?	Yes No Date ad re	eceived: 11/10/23
Note: Must have separate PB-19	Forms for each version of the ad (i	.e., for every ad with differing copy).
Federal candidate certification signe	d (above): Yes	No N/A
Disposition: Accepted Accepted IN PART (e.g., ad Rejected – provide reason:	copy not yet received to determine sp	onsor ID)*
*Upload partially accepted form, the	n promptly upload updated final form	when complete.
Date and nature of follow-ups, if any	(e.g., insufficient sponsor ID tag):	
Contract #: 723323	Station Call Letters: WSBS	Date Reseived/Requested:
Est. #:	Station Location: 7007 NW 77ave	Run Start and End Dates: 11/16-11/20
use this space to document schedule purchased or attach separately. If sta	of time purchased, when spots actua tion will not upload the actual times sp	cuments reflecting this transaction to the OPIF or lly aired, the rates charged and the classes of time sots aired until an invoice is generated, the name be placed in the "Terms and Disclosures" folder in