

Order #465276: Gilbert/D../Gilbert/D../Gilbert fo../

| Date | Action | Comment | By | Total \$ | # Spots | Line | Expected GRP |
|----------------------|--------------------|--|---------------|----------|---------|------|--------------|
| 05/22/20 10:37:38 AM | Processed | <async process> | Dawn Martin (| \$75.00 | 7 | 7 | 0.00 |
| 05/22/20 10:34:50 AM | Approved | | Monique Hoffr | \$75.00 | 7 | 7 | 0.00 |
| 05/22/20 10:34:47 AM | Approval Workflow | [Business Manager - Business Office Approval Needed Default] | Monique Hoffr | \$75.00 | 7 | 7 | 0.00 |
| 05/22/20 10:03:06 AM | Approval Workflow | [Sales Manager - Ready Default] | Leslie Heinem | \$75.00 | 7 | 7 | 0.00 |
| 05/22/20 10:02:57 AM | Ready for approval | New Order | Leslie Heinem | \$75.00 | 7 | 7 | 0.00 |
| 05/22/20 9:55:05 AM | New order created | <new order> | Leslie Heinem | \$0.00 | 0 | 0 | 0.00 |

[Sorted by: Date]

ORDER

Orders
Order / Rev: 465276
 Alt Order #:
Product Desc: Gilbert for County Council
 Estimate:
Flight Dates: 05/24/20 - 05/26/20
Original Date / Rev: 05/22/20 / 05/22/20
Order Type: GENERAL

WTCB-FM
Primary AE: Leslie Heinemann
Sales Office: L-CSC
Sales Region: Local

Agency Name: Gilbert/D/County Council
 Buying Contact:
 Billing Contact:
 4611 Hardscrabble Road
 Columbia, SC 29229

Billing Type: Cash
Billing Calendar: Calendar
Billing Cycle: EOM/EOC
Agency Commission: 0%

Advertiser Name: Gilbert/D/County Council
 Demographic: A25-54
 Product Codes: Candidates
 Revenue Code 1: DIR
 Revenue Code 2: POL-CAND
 Revenue Code 3: POL-LR

New Business Thru:
Advertiser External ID:
Agency External ID:
Unit Code: General

Bill Plan

| Start Date | End Date | # Spots | Gross Amount | Net Amount |
|------------|----------|---------|--------------|------------|
| 05/01/20 | 05/25/20 | 7 | \$75.00 | \$75.00 |

Totals

| Month | # Spots | Gross Amount | Net Amount | Rating |
|---------------|----------|----------------|----------------|-------------|
| May 2020 | 7 | \$75.00 | \$75.00 | 0.00 |
| Totals | 7 | \$75.00 | \$75.00 | 0.00 |

Account Executives

| Account Executive | Sales Office | Sales Region | Start Date / End Date | Order % |
|-------------------|--------------|--------------|-------------------------------|---------|
| Leslie Heinemann | L-CSC | Local | Start Of Order - End Of Order | 100% |

| Ln | Ch | Start | End | Inventory Code | Break | Start/End Time | Days | Len | Spots | Rate | Pri | Rtg | Type | Spots | Amount |
|---------------|------|-------------------|-----------------|----------------------|-------|-------------------|--------|-------------|-------|---------------|------|------|----------|----------------|---------|
| N 1 | WTCB | 05/24/20 | 05/26/20 | Sa-Su Prime Sa-Su | CM | 6a-7p | -----S | 1:00 | 4 | \$5.00 | P-80 | 0.00 | NM | 4 | \$20.00 |
| | | <u>Start Date</u> | <u>End Date</u> | <u>Weekdays</u> | | <u>Spots/Week</u> | | <u>Rate</u> | | <u>Rating</u> | | | | | |
| | | Week: 05/18/20 | 05/24/20 | -----S | | 4 | | \$5.00 | | 0.00 | | | | | |
| | | Week: 05/25/20 | 05/31/20 | ----- | | 0 | | \$5.00 | | 0.00 | | | | | |
| N 2 | WTCB | 05/24/20 | 05/26/20 | M-F Midday M-F | CM | 10a-3p | M----- | 1:00 | 1 | \$45.00 | P-80 | 0.00 | NM | 1 | \$45.00 |
| | | <u>Start Date</u> | <u>End Date</u> | <u>Weekdays</u> | | <u>Spots/Week</u> | | <u>Rate</u> | | <u>Rating</u> | | | | | |
| | | Week: 05/18/20 | 05/24/20 | ----- | | 0 | | \$45.00 | | 0.00 | | | | | |
| | | Week: 05/25/20 | 05/31/20 | M----- | | 1 | | \$45.00 | | 0.00 | | | | | |
| N 3 | WTCB | 05/24/20 | 05/26/20 | M-F Evening M-F | CM | 7p-12a | M----- | 1:00 | 2 | \$5.00 | P-80 | 0.00 | NM | 2 | \$10.00 |
| | | <u>Start Date</u> | <u>End Date</u> | <u>Weekdays</u> | | <u>Spots/Week</u> | | <u>Rate</u> | | <u>Rating</u> | | | | | |
| | | Week: 05/18/20 | 05/24/20 | ----- | | 0 | | \$0.00 | | 0.00 | | | | | |
| | | Week: 05/25/20 | 05/31/20 | M----- | | 2 | | \$5.00 | | 0.00 | | | | | |
| Totals | | | | | | | | | | | | | 7 | \$75.00 | |

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Wayne Gilbert, hereby request station time as follows:

| | |
|-------------------------|--|
| IDENTIFY CANDIDATE TYPE | <input type="checkbox"/> FEDERAL CANDIDATE |
| | <input checked="" type="checkbox"/> STATE OR LOCAL CANDIDATE |

| ALL QUESTIONS/BLOCKS MUST BE COMPLETED | |
|---|---|
| Candidate name: <u>Wayne Gilbert</u> | |
| Authorized committee: <u>Gilbert for Council Dist. 8</u> | |
| Agency requesting time (and contact information): <input checked="" type="checkbox"/> N/A | |
| Candidate's political party: <u>Democratic</u> | |
| Office sought (no acronyms or abbreviations): <u>Richland County Council District 8</u> | |
| Date of election: <input type="checkbox"/> General <input checked="" type="checkbox"/> Primary | |
| Treasurer of candidate's authorized committee: | |
| The undersigned represents that: (1) the payment for the broadcast time requested has been furnished by (check one box below): <input checked="" type="checkbox"/> the candidate listed above who is a legally qualified candidate, or <input type="checkbox"/> 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 | Station Representative |
| Signature: <u>T. Wayne Gilbert</u> | Signature: <u>Tammy O'Dell</u> |
| Name: <u>T. Wayne Gilbert</u> | Name: <u>TAMMY O'DELL</u> |
| Date of Request to Purchase Ad Time: <u>5/21/20</u> | Date of Station Agreement to Sell Time: <u>May 22, 2020</u> |

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:

T. Wayne Gilbert

Name:

T. Wayne Gilbert

Date:

5/21/20

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station?

Yes

No

Date ad received:

5.22.2020

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 #:

465260/465265/465246

Station Call Letters:

WISN/WXIA/WLXC/WISB

Date Received/Requested:

5.22.2020

Est. #:

465276

Station Location:

Columbia, SC

Run Start and End Dates:

5/24-5/26/2020

Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPFI 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 OPFI.