

# POLITICAL

Broadcast Agreement Forms | PB-17

Updated to Comply with the FCC Non-Discrimination Policy





## NAB POLITICAL ADVERTISING AGREEMENT FORMS (PB-17)

#### **TABLE OF CONTENTS**

#### **USING THE FORMS**

- PB-17 NAB AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS
- PB-17 NAB AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS



These political advertisement agreement forms have been designed to serve as actual contracts for the sale of political broadcast time and to satisfy FCC record retention requirements.

Produced by NAB's Legal Department and Published by the NAB Publications Department.

Copyright 2011 National Association of Broadcasters.

ISBN # 0-89324-381-7

Reproduction or publication of the contents, in whole or in part, without expressed permission is prohibited. No liability is assumed with respect to the use of the information contained herein.

Additional copies of the Political Agreement Forms in paper or electronic format are available through NAB Services, 1771 N Street, NW, Washington, DC 20036-2800. For price information, please call (202) 429-5484.



#### POLITICAL BROADCAST ADVERTISEMENT FORMS PB-17

#### **USING THE FORMS**

#### **IMPORTANT NOTE:**

For the PB-17 Issues Form Only - If an Issue Advertiser certifies that the programming does not communicate "a message relating to any political matter of national importance," stations must nonetheless independently verify that no such messages are communicated in the programming. Stations are required to ensure compliance in order to properly disclose rates and times aired in the public file.

#### Acrobat Reader 5.0

You must have version 5.0 or higher of Adobe's Acrobat Reader to use these forms. If you do not have Adobe Reader 5.0 or higher, you can download a free copy at: http://www.adobe.com/products/acrobat/readermain.html.

#### **Acrobat Toolbar Functions**

When you install the Acrobat Reader and view a fill-in form, you will see a toolbar at the top of the document like this:



You need to use only a few of these buttons to complete a fill-in form. The buttons you need to use are explained below:

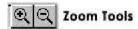


The **Hand Tool** will most likely be pre-selected the first time you use Acrobat Reader. This tool allows you to fill in the forms on your desktop. This tool is selected when the cursor appears in the shape of a hand like the one pictured on the button.

With a fill-in form on the screen, move the hand tool over a portion of the form to be filled in. You will notice that the hand icon changes to a text icon, which looks like a capital I. This means that this is an area of the form that you are able to fill in using your keyboard. After you fill in that box, move your mouse to another field to fill it in. Note: You may also use the TAB button on your keyboard to

Copyright © 2011 by the National Association of Broadcasters. May Not Be Copied, Reproduced, or Further Distributed.

advance to the next field. To mark a check box, move your Hand Tool over a box and click your left mouse button. To unmark the box, move the cursor over the box and click again.



The **Zoom Tools** allow you to change the current view of the form displayed. Depending on your monitor size, you may need to use the + Zoom Tool to get a better view of the form.



#### **Page Tools**

The first button moves you directly to the first page of the current form. The second button moves you back one page on the current form. The third button moves you one page forward on the current form. The fourth button moves you directly to the last page of the current form.

#### **Printing the Forms**

To print a completed form, click on the "File" menu and select the "Print" option.

#### **Saving the Forms**

Acrobat Reader does not allow forms to be saved. Complete the entire form, review and print prior to closing the file. Closing the file will erase all information filled in.

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

□ 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							
Station and	Location:			Date:			
I,					,		
being/on behalf	of:				, a legally		
qualified candida	ate of the				political		
party for the offi	ce of:						
in the							
election to be he	eld on:						
do hereby reque	est station time as f	follows:					
Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks		
Total Charges:							

national importance," list the matters	below:	to any pontical matter of
I represent that the payment for the a	above described broadcast time has been	furnished by:
•	he time as paid for by such person or ent s either a legally qualified candidate or a y qualified candidate.	-
The name of the treasurer of the cancel	lidate's authorized committee is:	
<del>_</del>	olitical advertising policies, including: a sales practices (not applicable to federal	
	CRIMINATE OR PERMIT DISCRIMI HE PLACEMENT OF ADVERTISING.	NATION ON THE BASIS
To Re Signed Ry C	andidate or Authorized C	`ommittee
Date	Nary Young Signature	
To Be Signed	d By Station Representat	ive
☐ Accepted	☐ Accepted in Part	☐ Rejected
Amtraca (Isra)		
Signature	Printed Name	Title

#### **CANDIDATE CERTIFICATION**

In Order For Federal Candidates to Receive The Lowest Unit Charge During a Political Window, the Following Certification is Required:

-		r authorized committee) herebin part) pursuant to this agree	by certify that the programming ment:
	$\Box$ does	$\Box$ does not	
		te (check applicable box). I futo an opposing candidate:	orther certify that for the
(chec	ek applicable box)		
	, ,	g contains a personal audio state, the office being sought, and t.	•
	image of the candidate displayed printed states the broadcast, and that paid for the broadcast.	ment identifying the candidate the candidate and/or the cand	seconds, and a simultaneously e, that the candidate approved idate's authorized committee
	signa	ature of candidate or authorized con	mmittee
	prir	nted name	date

#### AGREED UPON SCHEDULE

### (TO BE FILLED IN ONLY IF STATION DOES NOT ACCEPT ALL OF CANDIDATE'S REQUEST)

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

Total Charges:			
iotai Charges:			

#### AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

- (1) actual air time and charges for each spot;
- (2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- (3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

Note: Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.

## AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: Date:							
I,							
do hereby request station time concerning the following issue:							
Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks		
Total Charges:							
This broadcast time will be used by:							
Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"							
□ Yes □ No							

Signature	Printed Na	me	Title
☐ Accepted	☐ Accepted in	n Part	Rejected
TO BE SIG	GNED BY STATIO	N REPRESENT	TATIVE
Date	Signature	Contact Ph	one Number
TO BE S	IGNED BY ISSUE	ADVERTISER	2
onable attorney's fees, that ertisement(s). For the above script, or tape, which will	may ensue from the broadc ve-stated broadcast(s), I a be delivered to the statio	ast of the above-reque lso agree to prepare	ested
IS STATION DOES NOT	DISCRIMINATE OR PE	RMIT DISCRIMINA	ATION ON THE BASI
he names, offices, and add	resses of the chief executive	e officers, directors, an	
urnishing the payment, if ot	her than an individual person	on, is:	
represent that the payment	for the above described bro	oadcast time has been	furnished by:
		ng to any political mat	ter of national
	nportance," attach Agreed represent that the payment and you are authorized to an arnishing the payment, if ot a corporation; a co the names, offices, and additionable attorney and hold be considered attorney's fees, that artisement(s). For the above script, or tape, which will re the time of the schedul  TO BE SIO  Accepted  Accepted	represent that the payment for the above described broadcast(s), I a script, or tape, which will be delivered to the station re the time of the scheduled broadcasts.  TO BE SIGNED BY STATIO	represent that the payment for the above described broadcast time has been and you are authorized to announce the time as paid for by such person or enternishing the payment, if other than an individual person, is:    a corporation;

#### **AGREED UPON SCHEDULE**

For All Issue Advertisements That Communicate a Message Relating to Any Political Matter of National Importance

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

#### **Total Charges:**

#### **AFTER AIRING OF BROADCASTS:**

Attach invoices or Schedule Run Summary to this Form showing:

- (1) actual air time and charges for each spot;
- (2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- (3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

Note: Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.