

## CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Sage Media Planning & Placement, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

### ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Charles Booker

Authorized committee:

Booker for Kentucky

Agency requesting time (and contact information):

N/A Sage Media Planning & Placement

Candidate's political party:

Democrat

Office sought (no acronyms or abbreviations):

United States Senate

Date of election:

June 23 2020

General

Primary

Treasurer of candidate's authorized committee:

Donnie Adkins

The undersigned represents that:

(1) the payment for the broadcast time requested has been furnished by (check one box below):

the candidate listed above who is a legally qualified candidate, or

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:

Michele Certo obo Sage Media Planning & Placement

Digitally signed by Michele Certo obo Sage Media Planning & Placement  
Date: 2020.06.14 21:04:38 -04'00'

Signature:



Name: Michele Certo

Name:



Date of Request to Purchase Ad Time:

Date of Station Agreement to Sell Time:

**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:

Michele Certo obo Sage Media Planning & Placement

Digitally signed by Michele Certo obo Sage Media Planning & Placement  
Date: 2020.06.14 21:17:16 -04'00'

Name: Michele Certo

Date:

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?  Yes  No Date ad received: \_\_\_\_\_

**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):

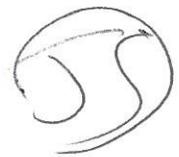
Contract #:	Station Call Letters: <i>WBRT WOKY</i>	Date Received/Requested: <i>6/22/20</i>
Est. #:	Station Location: <i>Bardonia Sp.</i>	Run Start and End Dates: <i>6/23/20</i>

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

<b>STATION:</b>	WOKH-FM	<b>ORDER#:</b>	3173893	<b>DATE:</b>	06/22/2020
<b>MARKET:</b>	UM - Springfield, KY	<b>AMOUNT:</b>	\$272.00	<b>AGENCY:</b>	MEDIA FINANCIAL SERVICES
<b>REP:</b>	Regional Reps Non-Rep	<b>SPOTS:</b>	16	Invoices@MediaFinancial.com	
<b>MOD:</b>	Stn Ver: 1 Last:				
<b>SALES OFFICE:</b>	PHILADELPHIA	<b>SLS PH:</b>	412 421 2600		
<b>SALESPERSON:</b>	Roger Rafson	<b>SLS FAX:</b>	412 421 6001		
<b>SLS EMAIL:</b>	Roger.Rafson@GenMediaPartners.com				
<b>AGENCY:</b>	MEDIA FINANCIAL SERVICES	<b>AGY CLI:</b>		<b>CONTRACT # FOR INVOICING 4382410</b>	
<b>ADVERTISER:</b>	Booker for Kentucky	<b>AGY PRD:</b>		<b>INVOICE:</b> MEDIA FINANCIAL SERVICES	
<b>PRODUCT:</b>	Est 7569 6/23 ONLY Candidate	<b>AGY EST:</b>	7569	Invoices@MediaFinancial.com	
<b>FLIGHT:</b>	06-23-2020 TO 6/23/2020	[X]Unwired [ ]Spot [ ]Mod			
<b>TOT # OF DAYS:</b>	1				
<b>PRIM. DEMO:</b>	Adults 35+	[X]Cash [ ]Trade			
<b>SEC. DEMO:</b>		<b>SPOT TYPE:</b>		<b>LAST SENT:</b> 06/22/2020 12:57	

**COMMENTS** Source

[Rep Comment] 06/22/2020: This is a new order. Please confirm receipt of order in Radio Exchange (if you are set up) or by email at joyce.vordenbaum@genmediapartners.com (WITH CALL LETTERS IN SUBJECT LINE) within 24 hours. Thank you. **\*\*PLEASE NOTE THAT MFS SHOULD RECEIVE PAYMENT FROM THE AGENCY ON THIS BUY VIA OVERNIGHT MAIL. MFS WILL THEN CUT YOU A CHECK AND WILL EMAIL YOU A COPY OF THE CHECK & TRACKING INFORMATION AS SOON AS POSSIBLE.\*\***



**\*\*Formerly Mundy Katowitz Media\*\***

Invoices are required: even for orders paid in advance. Proof of performance is required.

**THIS IS AN UNWIRED NETWORK ORDER. SEND INVOICES ELECTRONICALLY OR TO INVOICES@MEDIA FINANCIAL.COM BY THE 3RD OF THE MTH AFTER THE BROADCAST MTH HAS AIRED. MFS ELECTRONIC INVOICES: RADIOINVOICES.COM: RI12580 OR 9912580; MARKETRON: 120873; SpotData: IDB#1828; EMEDIATRADE:EMT10263.**

**ONLY UPON PAYMENT FROM THE AGY WILL MFS REMIT TO STATION. PAYMENT TO STATION WILL BE PROCESSED WITHIN 7 DAYS AFTER RECEIPT FROM AGENCY.**

By accepting and airing this schedule, station agrees to pay Regional Reps a sales commission equal to 15% of the agency gross in addition to the 15% agency commission.

DAY#1	6/23/2020 To 6/23/2020						TOT \$272.00			TOTAL SPOTS 16	
MC	LN	SPT TYP	DAYS	START	END TIME	LEN	START	STOP	SP/DY	RATE	TOTAL
	1		.T.....	6:00AM	10:00AM	60	6/23/2020	6/23/2020	8	\$18	\$144
	2		.T.....	10:00AM	3:00PM	60	6/23/2020	6/23/2020	8	\$16	\$128

<b>TOTAL</b>	Jun											Total
<b>SPOT</b>	16											16
<b>CASH</b>	272.00											272.00
<b>TOTAL</b>	272.00											272.00



WOKH-FM Radio  
 106 South 3rd St.  
 Bardstown, KY 40004  
 (502) 348 3943

REGIONAL REPS  
 6505 ROCKSIDE ROAD  
 SUITE 200  
 CLEVELAND, OH 44131

# WOKH Order Confirmation

OrderID: 1184-001

Sponsor: Booker for kentucky  
 Product: Booker for kentucky  
 Estimate/PO: 7659  
 AccountRep: House Accounts  
 BillingCycle: Broadcast Month  
 InvoiceType: Detail Notarized Affidavit  
 Run Dates: 6/23/2020 - 6/24/2020  
 Items Ordered: 16  
 Gross Amount: 272.00  
 Discounts: 0.00  
 Agency Commission: 0.00  
 Net Amount: 272.00

## Scheduled Station(s): WOKH Booker for kentucky

Printed 6/22/2020 2:59:13 PM

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Run Dates	Run Weeks	Run Times	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Week Total	Length	Description	Avail Type	Copy ID	Qty	Item Cost	Total Cost
01 6/23/2020 - 6/24/2020	All Weeks	06:00 AM - 10:00 AM		8						8		Spot	AA		8	18.00	144.00
02 6/23/2020 - 6/24/2020	All Weeks	10:00 AM - 03:00 PM		8						8		Spot	AA		8	16.00	128.00

**Broadcast Month Projected Billing:**

Apr-20	0.00	May-20	0.00	Jun-20	272.00	Q2-2020	272.00
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Confirmed Correct; Payment Guaranteed

Accepted for WOKH

WBRT  
106 S 3RD ST  
BARDSTOWN, KY 40004  
502-348-3943

Merchant ID: 00000502344

Ref #: 0002

### Phone Order

XXXXXXXXXX6202  
AMEX

Exp: 06/23

Entry Method: Manual

Total: \$ 369.60

06/23/20

17:07:40

Inv #: 000620

Appr Code: 160294

Apprvd: Online

Batch#: 000460

CVV2 Code: NOT PROCESSED P

PO #: 222

the designated time frame. Failure to do so can result in your funds

I agree to pay above total amount  
according to card issuer agreement  
(Merchant agreement if credit voucher)

X

Merchant Copy  
THANK YOU COME AGAIN

cEntee  
Express  
n Beach Lakes Blvd #903

06/23

9/13

• CUSTOMER CODE: ---

COPY CARD NUMBER

### INVOICE DETAIL

INVOICE NUMBER	INVOICE DATE	TOTAL AMOUNT
CIA	<del>-----</del>	179.20
CIA	Booker 272	190.40