CANDIDATE ADVERTISEMENT AGREEMENT FORM

I,SUSAN_ADANCHAK	, hereby request station time as follows:
IDENTIFY CANDIDATE TYPE	RAL CANDIDATE E OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCK	
Candidate name: SUSAN ADAMCHAK	•
Authorized committee: ADAMCHAK FOR	CITY COMMISSION
Agency requesting time (and contact information):	
Candidate's political party: DEMOCRAT	NONPARTISAN ELECTION
Office sought (no acronyms or abbreviations): CITY COMMISSION - MANHAT	TAN KS
Date of election: NOV. 7, 2023	General Primary
Treasurer of candidate's authorized committee: KATHLEEN OLD FATH	ER
The undersigned represents that:	
(1) the payment for the broadcast time requested has been fur	·
the candidate listed above who is a legally qualified car the authorized committee of the legally qualified candidate.	
(2) this station is authorized to announce the time as paid for b	
(3) this station has disclosed its political advertising policies, included and other sales practices.	
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: Just an Ademichah Name: SUSAN ADAYCHAK	Signature: Notice Besthern
Name: SUSAN ADAYCHAK	Name: Andrea Besthern
Date of Request to Purchase Ad Time: 10 Oct 23	Date of Station Agreement to Sell Time: 10/11/2023

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: SWAW Adamshake Name: SUSAN ADAMCHAK W
Name: SUSAN ADAMCHAK
Date: 16 Oct 23
TO BE COMPLETED BY STATION ONLY
Ad submitted to Station? Yes No Date ad received: 10/1/a/23
10/14/0
Federal candidate certification signed (above): Yes No N/A
Accepted Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)* Rejected – provide reason (optional): *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 #: H 661 -0000 Station Call Letters: Date Received/Requested: Station Location: Run Start and End Dates: 1 Wineral 2023 To 11/7
Est. #: Station Location: Run Start and End Dates: 10/23 to 11/7
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.

KMAN KMKF KXBZ KACZ KBLS Manhattan Broadcasting Co., Inc 2414 Casement Road Manhattan, KS 66502

On-Air Schedule

Order #: Description: 4661-00002 **GENERAL 2023**

Date Entered:

10/16/2023

P.O.#:

Salesperson:

Besthorn Andrea, Political

Invoice Frequency: Billed at end of Cal Month, Sorted by Date

ADAMCHAK FOR CITY COMMISSIONER 1000 MILL VALLEY CIR MANHATTAN, KS 66503

Statement Group:

KMAN KMKF KXBZ KACZ KBLS

Receivables Group:

Local/direct

Sales Commission:

Standard - Aged Collections

A/R Account: Order Discount: A/R Political- KMAN-AM

Agency Discount:

<None> <None>

Default Primary Product Code: Political (city)

Secondary Product Code:

<unassigned>

Last Modified: 10/16/2023

Modified 1 times

OrderType:

Per Spot

2	tart Date	End Date	Station	Scheduled	Time/E	vent	Repeated L	ength (Qty	Rate	Total	<u>M</u>	<u>Tu</u>	W	<u>Th</u>		<u>Sa</u>	<u>Su</u>
	10/23/2023	11/3/2023	KMAN-AM	06:00:00a	to 10:0	0:00a	Weekly	:30	20	13.00	260.00	2	2	2	2	2	0	0
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Station Totals:

 Station
 Spot Count
 Net Billing

 KBLS-FM
 76
 \$996.00

 KMAN-AM
 56
 \$696.00

 KXBZ-FM
 76
 \$996.00

Spot Count Ne	120 AV
	t Billing
October 2023 112 \$1,	512.00
November 2023 96 \$1,	176.00

Confirmed & Accepted for KMAN KMKF KXBZ KACZ KBLS By:

Accepted for ADAMCHAK FOR CITY COMMISSIONER By:



MANHATTAN BROADCAST

FOLLOW

2414 CASEMENT RD MAHATTAN, KS 66502 +1 785-776-1350

WWW.1350KMAN.COM

Subtotal Total Taxes \$2,688.00

\$0.00

Total

\$ 2,688 00

PAYMENT ID: HQWBNTV3XB91E

Hide Details

Card: Visa 0866
October 16, 2023, 9:43 AM
Method: TELEPHONE ORDER
Auth ID: 791047
Reference ID: 328900500096
Authorizing Network: VISA

DATE

VISA

October 16, 2023 9:43 am VISA

0866

View the Privacy Policies for Clover