

# RECORD OF REQUEST FOR PURCHASE OF POLITICAL TIME

## CANDIDATE/AUTHORIZED COMMITTEE FORM

FORM TO BE COMPLETED AT TIME OF ORDER AND PLACED IN POLITICAL/ PUBLIC INSPECTION FILE

1. **Date of Request:** 2/26/18
2. **Name of Agency making the Request:** Jamestown Associates
3. **Address of Agency making the Request:** 1133 21<sup>st</sup> St. NW  
Washington, DC 20036
4. **Name of Agency Contact making the Request:** Holly Horan
5. **Telephone Number of Agency Contact making the Request:** 202-544-7575
6. **Name of Candidate:** Eddie Corrigan
7. **Name of Candidate's Authorized Committee:** Citizens for Corrigan
8. **Name of Treasurer of Candidate's Committee:** Michael Corrigan
9. **Legally-Qualified Candidate for the Office of:** State representative  
**In the State/District/City/other of:** IL HD 53

10. **Election:**

PRIMARY ELECTION	<input checked="" type="checkbox"/>	Democrat	<input type="checkbox"/>	Republican	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>
GENERAL ELECTION	<input type="checkbox"/>	Democrat	<input type="checkbox"/>	Republican	<input type="checkbox"/>	Other	<input type="checkbox"/>
CAUCUS	<input type="checkbox"/>	Democrat	<input type="checkbox"/>	Republican	<input type="checkbox"/>	Other	<input type="checkbox"/>

11. **Request to Purchase Time:**  ACCEPTED BY SYSTEM  REJECTED BY SYSTEM

12. **Reason for Rejection:**

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13. **If request to purchase time is ACCEPTED attach a copy of (i) the Insertion Order/Agreement including schedule of time purchased, rates charged, class of time purchased, (ii) Invoice, and (iii) Affidavit of Performance indicating dates and times the advertisement aired.**

**Signed:**  **Date:** 2/26/2018  
Signature of Individual Receiving Request