

POLITICAL INQUIRY FORM FOR ISSUE/NON-CANDIDATE ADVERTISEMENTS

Market/Station: SACRAMENTO/KMAX

- 1. NAME OF AGENCY: WATERFRONT STRATEGIES
- 2. AGENCY CONTACT NAME: LAURA BASSETT
- 3. ADDRESS: 3050 K ST NW SUITE 100 WASHINGTON DC 20007
- 4. PHONE: 202-338-8700
- 5. ORGANIZATION/COMMITTEE NAME: HOUSE MAJORITY PAC

No abbreviations; use "Democratic Senatorial Campaign Committee" not "DSCC".)

- 6. CONTACT NAME:BRIAN WOLFF
- 7. ADDRESS: 1032 15TH ST NW SUITE 247 WASHINGTON DC 20005
- 8. PHONE NUMBER: 202-853-9089
- 9. LIST OF CHIEF EXECUTIVE OFFICERS, MEMBERS OF THE EXEC. COMMITTEE, OR BOARD OF DIRECTORS (INCL. TITLE): If there is reason to think the list is incomplete, e.g., only one name was provided, you must make a written inquiry to the advertiser/ agency asking them to confirm the accuracy. MIKE SMITH PRESIDENT, BRIAN WOLFF-TREASURER

IF ANY AD BUY IS REJECTED (INCLUDING IN PART), NOTE DATE OF REJECTION AND BRIEF REASON:

CUT-AND-PASTE, ADD, AND COMPLETE A SEPARATE TABLE BELOW FOR EACH AD

Ad-Specific Information

AD NAME:	DATE RECEIVED:	ISCI CODE:
ORDER NUMBER: (Insert separate Order Numbers and Flight Dates If Ad Is I	DER NUMBER: FLIGHT DATES TO RUN: separate Order Numbers and Flight Dates If Ad Is In Multiple Orders)	
TRAFFIC INSTRUCTIONS: (Unless specified on the Order being contemporaneously uploaded to Online File; may be in the form of percentage clearance)		
The organization above has purchased time to communicate a message THAT REFERS to a matter of national importance, for example a legally qualified candidate for federal office, an election to federal office, or a national legislative issue of public importance. [The NAB Form, this Political Inquiry Form, the Contract, and the Invoice must be uploaded to the online Public File for this ad.]		
Identify every legally qualified can	didate for federal office mentioned (or federal	deral election if no candidate is mentioned) in the spot:
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[Only the NAB Form and this Politic	cal Inquiry Form must be uploaded to the onlin	T DOES NOT REFER to a matter of national importance. ne Public File for this ad.]
STATION EMPLOYEE SUPPLEMENTING FORM:		
DATE SUPPLEMENTED:		