CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See Invoice for actual schedule and charges.						
1, Loyan manhart	, hereby request station time as follows:						
IDENTIFY CANDIDATE TYPE FEDE	RAL CANDIDATE E OR LOCAL CANDIDATE						
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED						
Candidate name:							
Logan manhert	AND THE RESIDENCE CONTROL OF THE PROPERTY OF T						
Authorized committee:							
Manhart for State House							
Agency requesting time (and contact information):							
N/A							
Candidate's political party:							
Republican							
Refublican Office sought (no acronyms or abbreviations):							
State House, District 1							
Date of election:	General Y Primary						
trne 4th							
Treasurer of candidate's authorized committee:							
toyan manhart							
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 b	y 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 DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY						
Candidate/Committee/Agency	Station Representative						
Signature: MM M M M M M M M M M M M	Signature: Kustun Mouis Name: Kristan Morris						
Name: Logan manhart	Name: Kristan Morris						
Date of Request to Purchase Ad Time: 4 17/19/11	Date of Station Agreement to Sell Time: L1 17 7770						

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: MM Mule Telephone Telephone										
Name: Logan manharz Date: 4/12/2024										
Date: # 4/12/2024										
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 #: See ## Station Call Letters: See ### Est. #: Station Location: ###	Date Received/Requested:									
Est. #: See AH Station Location: See AH	Run Start and End Dates:									
Upload order, this form and invoice (or traffic system print-out) or other docu use this space to document schedule of time purchased, when spots actually purchased or attach separately. If station will not upload the actual times spo of a contact person who can provide that information immediately should be the OPIF.	raired, the rates charged and the classes of time ts aired until an invoice is generated, the name									

Date: 4/12/24

Sales Order

Stat	ion:	KJKQ-FM										Buyer:							
Contract Name: Logan Manhart for House KJKQ																			
Contract#: (none)																			
Start Date: 4/19/24 End Date:																			
Revenue Type: Local Political						Ту	/pe:	С	asi									nm %: 0	
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				St NW I									-	·	****				***************************************
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					or State F						٠.								
Con	npetitive	Code: Po	olitic	al		******													
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1	START 5/13/24	END 6/03/24	wks	START 6:00 AM	12:00 AM	30	M 10	T	W 10	T	F 10	SA	SU	Per Wk	D/W D	8.00	SPOTS 100	\$\$ 800.00	, , , ,
2	4/19/24	4/25/24		6:00 AM	12:00 AM	30	10	5	10	5	10			10	D	8.00	100	80.00	
Billir	ng Project	ions: By M CA ST	,	Apr 24 80.00 80.00	May 24 720.00 480.00		Jun 80 320	.00											
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