

ORDER



Orders
Order / Rev: 383969
Alt Order #: 09811606
Product Desc: Anti-Kelly/WI State Supreme Court Race
Estimate: 7359
Flight Dates: 04/04/20 - 04/07/20
Original Date / Rev: 04/03/20 / 04/03/20
Order Type: GENERAL

WDJT-TV-LP CBS58

Primary AE: Jay Smith
Sales Office: HDC
Sales Region: NAT

Agency Name: New Media Firm
Buying Contact:
Billing Contact:
 1322 G Street SE
 Washington, DC 20003

Billing Type: Cash
Billing Calendar: Broadcast
Billing Cycle: EOM/EOC
Agency Commission: 15%

Advertiser Name: Issue/Better WI Together PF
Demographic: A35+
Product Codes: PL Issue
Priority: P-2
Revenue Code 1: AGY
Revenue Code 2: POL
Revenue Code 3: ISS

New Business Thru:
Order Separation: 00:15:00
Advertiser External ID:
Agency External ID:
Unit Code: General

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
03/30/20	04/06/20	3	\$1,800.00	\$1,530.00

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
April 2020	3	\$1,800.00	\$1,530.00	0.00
Totals	3	\$1,800.00	\$1,530.00	0.00

Account Executives

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Jay Smith			Start Of Order - End Of Order	100%

Order Share	Share	Total
WDJT-TV-LP CBS58	22%	\$1,800.00
Market	100%	\$8,181.82

Competitive Share	Share	Total
CABLE	0%	\$0.00
WBME	4%	\$327.27
WCGV	0%	\$0.00
WISN	26%	\$2,127.27
WITI	21%	\$1,718.18
WMLW-	7%	\$572.73
WPXE	0%	\$0.00
WTMJ	17%	\$1,390.91
WVTV	3%	\$245.45
WYTU	0%	\$0.00

Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	Spots	Amount
N 1	WDJT	04/05/20	04/05/20	Face the Nation Face the Nation	CM	930a-1030a	-----S	:15/:15	1	\$200.00	P-2	0.00	DN	1	\$200.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>					
		Week: 03/30/20	04/05/20	-----S		1		\$200.00		0.00					
N 2	WDJT	04/06/20	04/06/20		CM	3p-4p	M-----	:15/:15	1	\$200.00	P-2	0.00	DN	1	\$200.00

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Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	Spots	Amount
				3p-4p Dr Phil											
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>					<u>Spots/Week</u>	<u>Rate</u>		<u>Rating</u>			
		Week: 04/06/20	04/12/20	M-----					1	\$200.00		0.00			
N 3	WDJT	04/06/20	04/06/20	Jeopardy 6p-630p Jeopardy / M-F	CM	6pm-630pm	M-----	:15/:15	1	\$1,400.00	P-2	0.00	DN	1	\$1,400.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>					<u>Spots/Week</u>	<u>Rate</u>		<u>Rating</u>			
		Week: 04/06/20	04/12/20	M-----					1	\$1,400.00		0.00			
													Totals	3	\$1,800.00

ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

I, The New Media Firm, hereby request station time as follows: See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

Check one:

- Ad "communicates a message relating to any political matter of national importance" by referring to (1) a legally qualified candidate for federal office; (2) an election to federal office; (3) a national legislative issue of public importance (e.g., health care legislation, IRS tax code, etc.); or (4) a political issue that is the subject of controversy or discussion at the national level.
- Ad does NOT communicate a message relating to any political matter of national importance (e.g., relates only to a state or local issue).

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Station time requested by: A Better Wisconsin Together Political Fund

Agency name: The New Media Firm

Address: 1730 Rhode Island Ave NW #213, Washington, DC 20036

Contact:	Phone number:	Email:
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Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission [for federal committees] with no acronyms; name must match the sponsorship ID in ad):

Name: A Better Wisconsin Together Political Fund

Address: 6516 Monona Drive #244, Monona, WI 53716

Contact:	Phone number:	Email:
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Station is authorized to announce the time as paid for by such person or entity.

List ALL chief executive officers, members of the executive committee and the board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary):

Treasurer: Jacqueline Boynton

By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).

If ad refers to a federal candidate(s) or federal election, list ALL of the following: N/A

Name(s) of every candidate referred to:

Office(s) sought by such candidate(s) (no acronyms or abbreviations):

Date of election:

Clearly identify EVERY political matter of national importance referred to in the ad (no acronyms); use separate page if necessary: N/A

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

Advertiser/Sponsor	Station Representative
Signature: <i>Matt Burgess</i>	Signature:
Name: Matt Burgess	Name:
Date of Request to Purchase Ad Time: 3/25/20	Date of Station Agreement to Sell Time:

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).

If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.

Disposition:

- Accepted
- Accepted IN PART (e.g., ad not received to determine content)*
- Rejected – provide reason:

*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any:

Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

For national issue ads only (not required for state/local issue ads):

Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.