

AGREEMENT FORM FOR POLITICAL BROADCASTS

**WTHQ AM 1030/FM 94.1
WBYG 99.5 FM**
303 8th Street, Point Pleasant, WV 25550
Phone 304-675-2763 / Fax 675-2771

STATION and LOCATION WYVK & WBYG, Point Pleasant, WV

DATE: 3/5/20 _____ 20 _____

I, BJ Smith-Kressen _____ (on behalf of) _____

a legally qualified candidate of the Republican _____ political party for the office of _____

in the Primary _____ election to be held on March, 17, 2020 _____

do hereby request station time as follows:

Length of Broadcast	Time of Day, Rotation or Package	Days	Class of Time	Times Per Week	No. of Weeks	Rate
30 sec	7am-7pm	5	ROS	10	1	\$7 per spot

Date of First Broadcast: 3/9/20 _____

Date of Last Broadcast: 3/13/20 _____

Total Charges: \$70 _____

The broadcast time will be used by BJ Smith-Kressen I represent that the payment for the above-described broadcast time has been furnished by BJ Smith-Kressen and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is () a corporation; () a committee; () an association; or () other unincorporated group. The names and offices of the chief executive officers of the entity are: _____

I agree to indemnify and hold harmless the station from any damages or liability, including reasonable attorney's fees, that may ensue from the performance of the above-stated broadcasts. For the above-stated broadcasts I also agree to prepare a script or transcription, which will be delivered to the station at least _____ days before the time of the scheduled broadcasts. (Note: the two preceding sentences are not applicable if the candidate personally appears during the broadcast.) The station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices. (Note: The preceding sentence may be deleted). The purchase of the time described herein is controlled, approved or authorized by the candidate or his/her authorized committee. (Note: the preceding sentence applies only to candidates for non-federal office.)

[Signature] _____ 3/5/20 _____
(CANDIDATE, AGENT) DATE

Accepted Rejected by: Shari Cochran _____ title: manager _____

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STATION and LOCATION W ~~YVK~~ & ~~WBYG~~ Point Pleasant, WV

DATE: 3/6/20 _____ 20 _____

I, _____ (on behalf of) _____

a legally qualified candidate of the Republican political party for the office of

MEIGS Co TREASURER

in the Primary election to be held on 3/17/20

do hereby request station time as follows:

Length of Broadcast	Time of Day, Rotation or Package	Days	Class of Time	Times Per Week	No. of Weeks	Rate
<u>30</u>	<u>7A-7PM</u>	<u>4</u>	<u>ROS</u>	<u>#0</u>	<u>1</u>	<u>\$700</u>

Date of First Broadcast: _____

Date of Last Broadcast: _____

Total Charges: \$280

The broadcast time will be used by BT Smith Kressen. I represent that the payment for the above-described broadcast time has been furnished by BT Smith Kressen and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is () a corporation; () a committee; () an association; or () other unincorporated group. The names and offices of the chief executive officers of the entity are: _____

I agree to indemnify and hold harmless the station from any damages or liability, including reasonable attorney's fees, that may ensue from the performance of the above-stated broadcasts. For the above-stated broadcasts I also agree to prepare a script or transcription, which will be delivered to the station at least _____ days before the time of the scheduled broadcasts. (Note: the two preceding sentences are not applicable if the candidate personally appears during the broadcast.) The station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices. (Note: The preceding sentence may be deleted). The purchase of the time described herein is controlled, approved or authorized by the candidate or his/her authorized committee. (Note: the preceding sentence applies only to candidates for non-federal office.)

[Signature]
 (CANDIDATE, AGENT)

3/6/20
 DATE

Accepted Rejected by: Shari Cochran, title: manager



BROADCAST ORDER FORM

WYVK-FM
 303 Eighth St.
 Point Pleasant, WV 25550

Telephone: 304-675-2763 Fax: 304-675-2771

SALES REP: Dave Harris NEW: YES / NO CART: _____ ORDER #: _____

CLIENT: BJ Smith Kreseen AGENCY/BILLING: _____

1 A DAY ON WBYG & WYVK
3/9 - 3/13

PO Pol

CONTACT: _____ CONTACT: _____

TELEPHONE: _____ FAX: _____ TELEPHONE: _____ FAX: _____

POLITICAL CASH _____ TRADE _____ CALENDAR _____ BROADCAST _____ NOTARIZED AFFIDAVIT: YES / NO

PRODUCT: _____ MONTHLY BILLING: JAN _____ FEB _____ MAR

START DATE: 3/9 END DATE: 3/13 APR _____ MAY _____ JUNE _____ JULY _____ AUG _____

LENGTH: 30 COPY OF SCRIPT FOR CO-OP?: YES / NO SEPT _____ OCT _____ NOV _____ DEC _____

TOTAL # OF ANNOUNCEMENTS: 10 TOTAL CONTRACT COST: \$70 AGENCY COMM%: _____

FLIGHT DATES	RATE	RUN TIMES	MON.	TUES.	WED.	THURS	FRI.	SAT.	SUN.

Positive Radio Group-OH, WYVK-FM, and all affiliated Stations do not discriminate in any way on the basis of race or gender with regard to its advertising practices. Customer hereby agrees to all terms and conditions of this agreement. Customer certifies that he/she/it has the power to make, deliver, and perform under this agreement, and, if customer is not an individual that the undersigned officer of customer is duly authorized to enter into this agreement for and on behalf of customer. Witness our hands and seals the day and date first written below. Both parties may cancel contract with two weeks written notice. Client agrees to pay interest if account is more than 30 days late. Client agrees to pay Attorney fees of 33% and any other fees charged if collection process is needed. TO BE SUBMITTED FOR APPROVAL BY MANAGEMENT.

Station Authorized Representative: Shari Cochran Customer or other Duly Authorized Signature: [Signature]

Date: _____ Customer Name (Please Print): [Signature] Title: _____



BROADCAST ORDER FORM

WYVK-FM
 303 Eighth St.
 Point Pleasant, WV 25550

Telephone: 304-675-2763 Fax: 304-675-2771

SALES REP: David Harris NEW: YES / NO CART: _____ ORDER #: _____

CLIENT: BT Smith Kzessew AGENCY/BILLING: _____

5 more spots on 3/13, 3/14, 3/15 & 3/16
on WBYG & WYVK

CONTACT: _____ CONTACT: _____

TELEPHONE: 740-444-1522 FAX: _____ TELEPHONE: _____ FAX: _____

POLITICAL _____ CASH _____ TRADE _____ CALENDAR _____ BROADCAST _____ NOTARIZED AFFIDAVIT: YES / NO

PRODUCT: _____ MONTHLY BILLING: JAN _____ FEB _____ MAR _____

START DATE: _____ END DATE: _____ APR _____ MAY _____ JUNE _____ JULY _____ AUG _____

LENGTH: _____ COPY OF SCRIPT FOR CO-OP?: YES / NO SEPT _____ OCT _____ NOV _____ DEC _____

TOTAL # OF ANNOUNCEMENTS: _____ TOTAL CONTRACT COST: \$ 280 AGENCY COMM%: _____

FLIGHT DATES	RATE	RUN TIMES	MON.	TUES.	WED.	THURS	FRI.	SAT.	SUN.

Positive Radio Group-OH, WYVK-FM, and all affiliated Stations do not discriminate in any way on the basis of race or gender with regard to its advertising practices. Customer hereby agrees to all terms and conditions of this agreement. Customer certifies that he/she/it has the power to make, deliver, and perform under this agreement, and, if customer is not an individual that the undersigned officer of customer is duly authorized to enter into this agreement for and on behalf of customer. Witness our hands and seals the day and date first written below. Both parties may cancel contract with two weeks written notice. Client agrees to pay interest if account is more than 30 days late. Client agrees to pay Attorney fees of 33% and any other fees charged if collection process is needed. **TO BE SUBMITTED FOR APPROVAL BY MANAGEMENT.**

Station Authorized Representative: Shari Cochran Customer or other Duly Authorized Signature: [Signature] 3/6/20

Date: _____ Customer Name (Please Print) _____ Title: _____