## **CANDIDATE ADVERTISEMENT AGREEMENT FORM**

See <b>Order</b> for proposed schedule and charges.	See <b>Invoice</b> for actual schedule and charges.
, JAMIE OLIVER	, hereby request station time as follows:
FEDE	RAL CANDIDATE
IDENTIFY CANDIDATE TYPE STATI	E OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED
Candidate name:	
JAMIE OLIVER	
Authorized committee:	
JAMIE OLIVER FOR COUNTY COMMISSIONER	
Agency requesting time (and contact information):	
V N/A	
Candidate's political party:	
REPUBLICAN	
Office sought (no acronyms or abbreviations):	
LEFLORE COUNTY COMMISSIONER DISTRICT #3	
Date of election:	General Primary
AUGUST 23RD RUN OFF ELECTION	
Treasurer of candidate's authorized committee:	
JAMIE OLIVER	
The undersigned represents that:	
(1) the payment for the broadcast time requested has been fur	nished by (check one box below):
the candidate listed above who is a legally qualified car	ndidate, or
the authorized committee of the legally qualified candi	date 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, inc	
and other sales practices (not applicable to federal candida	tes).
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:	Signature:
Camie Man	
Name: JAmie Oliver	Name:
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time:

Federal Candidate Certification:  The undersigned hereby certifies that the broadcast matter to be aired pursition opposing candidate or, if it does, (2) contains a clearly identifiable photen a duration of at least four seconds and a simultaneously displayed printer the candidate approved the broadcast and that the candidate and/or the cabroadcast or if radio programming, contains a personal audio statement by the office being sought and that the candidate has approved the broadcast.	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.	this disclosure either (1) does not refer or similar image of the candidate nent identifying the candidate, that s's authorized committee paid for the didate that identifies the candidate,
Candidate/Authorized Committee/Agency	Agency	
Signature:		
Name JHMie Oliver	1	
Date: 8-18-2022		
TC	TO BE COMPLETED BY STATION ONLY	VLY
Ad submitted to Station?	ss No Date ad received:	
Note: Must have separate PB-19 For	Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).	every ad with differing copy).
Federal candidate certification signed (above):	bove):	N/A
Accepted IN PART (e.g., ad copy Rejected – provide reason:	PARI (e.g., ad copy not yet received to determine sponsor ID)* ovide reason:	<u>k</u>
*Upload partially accepted form, then pr	*Upload partially accepted form, then promptly upload updated final form when complete.	mplete.
Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):	g., insufficient sponsor ID tag):	
Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:
Upload order, this form and invoice (or truse this space to document schedule of the purchased or attach separately. If station of a contact person who can provide that the OPIF.	Upload order, this form and invoice (or traffic system print-out) or other documents 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 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.	reflecting this transaction to the OPIF or the rates charged and the classes of time I until an invoice is generated, the name I in the "Terms and Disclosures" folder in