

WNSP FM Invoice

WNSP FM 105.5
 1100 Dauphin St. Suite E.
 Mobile, AL 36604

Invoice ID: 24040073
 Invoice Date: 4/20/2024
 Account ID: 0543
 Order ID: 0543-001
 Account Rep: Michael Braumer

Amount Due: \$0.00

Amount Paid: _____

CAROLEENE DOBSON FOR CONGRESS
 2130 HIGHLAND AVE S
 BIRMINGHAM AL 35205

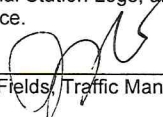
The Sound of Mobile WNSP FM
 105.5 FM
 251-438-5460

Sponsor: Caroleene Dobson for Congress
 Caroleene Dobson for Congress

Date	Time	Length	Description	CopyID / ISCI Code	Cost
4/13/2024	06:40 AM	1:00	Spot	18135	20.00
4/13/2024	10:57 AM	1:00	Spot	18135	20.00
4/13/2024	02:28 PM	1:00	Spot	18135	20.00
4/14/2024	08:59 AM	1:00	Spot	18135	20.00
4/14/2024	12:19 PM	1:00	Spot	18135	20.00
4/14/2024	04:57 PM	1:00	Spot	18135	20.00
4/15/2024	06:14 AM	1:00	Spot	18135	20.00
4/15/2024	07:18 AM	1:00	Spot	18135	20.00
4/15/2024	08:16 AM	1:00	Spot	18135	20.00
4/15/2024	10:22 AM	1:00	Spot	18135	20.00
4/15/2024	11:24 AM	1:00	Spot	18135	20.00
4/15/2024	12:40 PM	1:00	Spot	18135	20.00
4/15/2024	01:29 PM	1:00	Spot	18135	20.00
4/15/2024	03:50 PM	1:00	Spot	18135	20.00
4/15/2024	04:48 PM	1:00	Spot	18135	20.00
4/15/2024	05:58 PM	1:00	Spot	18135	20.00
4/16/2024	07:29 AM	1:00	Spot	18135	20.00
4/16/2024	08:29 AM	1:00	Spot	18135	20.00
4/16/2024	09:43 AM	1:00	Spot	18135	20.00
4/16/2024	11:00 AM	1:00	Spot	18135	20.00
4/16/2024	12:24 PM	1:00	Spot	18135	20.00
4/16/2024	01:16 PM	1:00	Spot	18135	20.00
4/16/2024	02:46 PM	1:00	Spot	18135	20.00
4/16/2024	04:50 PM	1:00	Spot	18135	20.00
4/16/2024	05:48 PM	1:00	Spot	18135	20.00
25 Total Items				Total Cost:	\$500.00
4/16/2024 PrePayment Applied Credit Card:					-\$500.00
Amount Due:					\$0.00

AFFIDAVIT OF PERFORMANCE: I certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice.

Amount Due: \$0.00



 Lori Fields, Traffic Manager

WNSP FM Order Confirmation

OrderID: 0543-001

WNSP FM 105.5
 1100 Dauphin St. Suite E.
 Mobile, AL 36604

Sponsor: Caroleene Dobson for Congress
 Product: Caroleene Dobson for Congress
 Estimate/PO: Michael Braumer
 AccountRep: Calendar Month
 BillingCycle: Detail Affidavit
 InvoiceType: 4/13/2024 - 4/16/2024
 Run Dates: 25
 Items Ordered: \$500.00
 Ordered Amount:

CAROLEENE DOBSON FOR
 2130 HIGHLAND AVE S
 BIRMINGHAM AL 35205

Scheduled Station(s): WNSP FM

Caroleene Dobson for Congress

Printed 4/12/2024 1:24:13 PM

Run Dates	Run Weeks	Run Times	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Week Total	Length	Descriptio	Avail Type	Copy ID	Qty	Item Cost	Total Cost
01 4/13/2024 - 4/14/2024	All Weeks	06:00 AM - 10:00 AM						1	1	2	1:00	Spot		18135	2	20.00	40.00
02 4/13/2024 - 4/14/2024	All Weeks	10:00 AM - 02:00 PM						1	1	2	1:00	Spot		18135	2	20.00	40.00
03 4/13/2024 - 4/14/2024	All Weeks	02:00 PM - 06:00 PM						1	1	2	1:00	Spot		18135	2	20.00	40.00
04 4/15/2024 - 4/16/2024	All Weeks	06:00 AM - 10:00 AM	3	3						6	1:00	Spot		18135	6	20.00	120.00
05 4/15/2024 - 4/16/2024	All Weeks	10:00 AM - 02:00 PM	4	3						7	1:00	Spot		18135	7	20.00	140.00
06 4/15/2024 - 4/16/2024	All Weeks	02:00 PM - 06:00 PM	3	3						6	1:00	Spot		18135	6	20.00	120.00

Calendar Month Projected Billing:

Month	Projected Cost	Actual Cost	Period
Apr-24	500.00	0.00	Q2-2024
May-24	0.00	0.00	
Jun-24	0.00	0.00	
Total	500.00	0.00	

Confirmed Correct; Payment Guaranteed

Accepted for WNSP FM

THE CRAB THE SOUL

MAM



1100 DAUPHIN ST. - SUITE #E
MOBILE, AL 36604
Phone: (251) 438-5460
Fax: (251) 438-5462

Order I.D.

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New Account Existing Account
 Change New Order

Date 4/12/24

Customer Type:
 Local National Trade
 Contract # _____
 P.O.# _____ Est.# _____
 Sales Rep: Michael
 Billing Type: Agency Discount:
 Standard Broadcast Yes
 Calendar Month No
 Co-OP: Copy I.D. _____
 Yes
 No
 Co-op Description: _____
POLITICAL

Advertiser: Caroleene Dobson for Congress

Billing Name/Agency _____
 Address: 2130 Highland Ave S.

City: Birmingham State: AL Zip: 35205

Contact: Drew Dickson Phone () _____

Email: drew@srcomm.us Cell () 256 334 0840

Please Enter Our Order For Advertising As Follows

SCHEDULE

LENGTH	START DATE	END DATE	START TIME	END TIME	RATE	M	T	W	T	F	S	S	REMARKS
:60	4/13	4/14	6A	10A	20						1	1	
↓	↓	↓	10A	2P	↓						1	1	
↓	↓	↓	2P	6P	↓						1	1	
↓	4/15	4/16	6A	10A	↓	3	3						
↓	↓	↓	10A	2P	↓	4	3						
↓	↓	↓	2P	6P	↓	3	3						

Totals: No. Spots _____ Weekly Cost \$ _____ Schedule Cost \$ _____ Gross 500

MONTHLY COST

MONTH	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC	TOTAL
AMOUNT				500									
# ANNS													

- This offer becomes a binding contract upon acceptance by General Manager of Station or his authorized agent.
- Bills shall be rendered monthly and shall be due and payable within ten (10) days from the date of invoice. Eighteen percent (18%) interest per annum will be charged on delinquent accounts.
- Station shall have the right to cancel this contract upon default by advertiser in the payment of bills or other material breach. Upon cancellation all broadcasting done hereunder and not paid shall become immediately due and payable at the earned rate. Advertiser shall pay the attorney's fees in the event legal action is necessary to enforce this agreement or any of the terms thereof.
- Contract subject to termination by either party upon fourteen (14) days prior written notice.
- Contract subject to short rate, or rebate, by earned frequency.
- Political and entertainment advertising must be cash in advance.
- Advertiser shall hold Station and its agents, employees and officers, harmless against liability for libel, slander, illegal competition or trade practice, infringement of trademarks, trade names or program titles, violation of rights of privacy and infringement of copyrights and proprietary rights resulting from the broadcasting of broadcasts herein provided in the form furnished by advertiser. Advertiser warrants that all advertising copy submitted to Station will truly represent the product or services advertised and will be free from false claims or assertions.

ADVERTISER DEFAULT

In the event of advertiser failure to make any payment when due and payable, advertiser shall be deemed in default. Advertiser agrees to pay all expenses incurred by station in connection with the collection of this account, including but not limited to reasonable attorneys fees and court costs, all such expenses, cost, and fees shall be deemed part of the indebtedness.

NON-DISCRIMINATION POLICY

Dot Com Plus, LLC and its stations, WNSP-FM & WZEW-FM, do not discriminate in advertising contracts on the basis of race or ethnicity. Any provision in any order or agreement for advertising that purports to discriminate on the basis of race or ethnicity, even of handwritten, typed, or otherwise made part of a particular contract, is hereby rejected.

ACCOUNT EXECUTIVE _____ ADVERTISER _____
 ACCEPTED FOR STATION _____ TITLE _____ DATE _____

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.

I, Drew Dickson, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Caroleene Dobson

Authorized committee:

Dobson for Congress

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

Alabama's 2nd Congressional District

Date of election:

4/16/24

General

Primary

Treasurer of candidate's authorized committee:

Bobby Dobson

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 by 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 DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

Candidate/Committee/Agency	Station Representative
Signature: Name: <u>Drew Dickson</u> Date of Request to Purchase Ad Time: <u>4/12/24</u>	Signature: Name: <u>Meg Moreland</u> Date of Station Agreement to Sell Time: <u>4/12/24</u>

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:

Name:

Drew Dickson

Date:

4/12/26

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station?

Yes

No

Date ad received:

4/12/26

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 #:

Station Call Letters:

Date Received/Requested:

Est. #:

Station Location:

Run Start and End Dates:

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.