

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

FEDERAL CANDIDATE

STATE/LOCAL CANDIDATE

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

<b>Station and Location:</b> <span style="font-size: 1.5em; color: blue;">Comcast</span>	<b>Date:</b> <span style="font-size: 1.5em; color: blue;">4.30.18</span>
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I, Brett Christner,  
 being/on behalf of: Friends of Wendi Thomas,  
 a legally qualified candidate of the Republican  
 political party for the office of: PA HD 178  
 in the Special  
 election to be held on: May 15th, 2018

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
Schedule Varies	VARIES				

**Attach proposed schedule with charges (if available):**

I represent that the payment for the above described broadcast time has been furnished by:

Friends of Wendi Thomas ( a State Level Campaign )

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Peter F. Palestina

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

**To Be Signed By Candidate or Authorized Committee**

4/9/2018

Date

Peter F. Palestina

Signature

**To Be Signed By Station Representative**

Accepted

Accepted in Part

Rejected

[Signature]

Susan Karlis

Sales Manager

Signature

Printed Name

Title

### FEDERAL CANDIDATE CERTIFICATION

**In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:**

I, Friends of Wendi Thomas  
(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

does  does not

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

the 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.

the television programming 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.

*Peter F. Palestina*

Treasurer

signature of candidate or authorized committee

Peter F. Palestina

4/9/2018

printed name

date



**Client Information Form  
CANDIDATE**

**Candidate Name:** Wendi Thomas

**Official Campaign Name:** Friends of Wendi Thomas

**Office/District Running for:** PA 178th Representative In the General Assembly

**Campaign Address:** 47 Lynford Rd.

**City, State & Zip Code:** Richboro, PA 18954

**Campaign Phone:** 215-450-7872

**Campaign Website URL:** www.votewendi.com

**Campaign Contact Person:** Jason Ercole

**Campaign Treasurer:** Peter F. Palestina

*\*Please complete all sections of this form. Media outlets may not accept advertising if required information is omitted.\**