WBBN-FM WXRR-FM WKZW-FM WBBL-FM WKZW-HD2 BLAKENEY COMMUNICATIONS, INC PO BOX 6408 LAUREL, MS 39441 USA

Order #: Description: 7180-00005

Date Entered:

ORDER 2 10/20/2023

P.O.#:

Salesperson:

BLAKENEY, DEBBIE

Invoice Frequency: Billed at end of Cal Month, Sorted by Date

JOEY TOLER 866 LAKE COMO RD LAUREL, MS 39443

On-Air Schedule

	Start Date	End Date	Station	Scheduled 7	Time/Event	Repeated	Length	Qty	Rate	Total	M	Tu	W	Th	F	<u>Sa</u>	Su
1	10/27/2023	10/31/2023	WBBN-FM	06:00:00a	to 10:00:00a	Weekly	:30	5	21.25	106.25	1	1	0	0	1	1	1
2	10/27/2023	10/31/2023	WXRR-FM	03:00:00p 1	to 07:00:00p	Weekly	:30	5	15.30	76.50	1	1	0	0	1	1	1
3	11/1/2023	11/7/2023	WBBN-FM	06:00:00a 1	to 10:00:00a	Weekly	30	18	21,25	382,50	3	2	2	3	2	3	3
4	11/1/2023	11/7/2023	WBBN-FM	03:00:00p 1	to 06:00:00p	Weekly	30	16	21.25	340_00	2	3	2	2	3	2	2
5	10/27/2023	10/31/2023	WXRR-FM	06:00:00a f	to 10:00:00a	Weekly	:30	5	15_30	76_50	1	1	0	0	1	1	1
6	10/27/2023	10/31/2023	WBBN-FM	03:00:00p 1	o 07:00:00p	Weekly	:30	5	21.25	106,25	1	1	0	0	1	1	1
7	11/1/2023	11/7/2023	WXRR-FM	06:00:00a 1	to 10:00:00a	Weekly	30	18	15,30	275,40	3	2	2	3	2	3	3
8	11/1/2023	11/7/2023	WXRR-FM	03:00:00p 1	o 06:00:00p	Weekly	:30	16	15.30	244.80	2	3	2	2	3	2	2

Total Charges:

\$1,608.20

Station does not discriminate in the sale of advertising time, and will not accept advertising which is placed with the intent to discriminate on the basis of race or ethnicity. Any provision in any order or agreement for advertising that purports to discriminate, or has the effect of discriminating, on the basis of race or ethnicity, is hereby declared null and void.

	Projected Calen	dar Month Billing Totals fo	r JOEY TOLER / 7180-0000
		Spot Count	Net Billing
October	2023	20	\$365.50
November	2023	68	\$1,242.70
Total:	·	88	\$1,608.20

Confirmed & Accepted for WBBN-FM WXRR-FM WKZW-FM WBBL-FM

Accepted for JOEY TOLER By:

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.								
, Joey Toler	, hereby request station time as follows:							
IDENTIFY CANDIDATE TYPE	ERAL CANDIDATE							
	E OR LOCAL CANDIDATE							
ALL QUESTIONS/BLOCKS MUST BE COMPLETED								
Candidate name:								
Joey Toler (William J. Toler)								
Authorized committee:								
Agency requesting time (and contact information):								
N/A								
Candidate's political party:								
INDEPENH								
Office sought (no acronyms or abbreviations):								
Supervisor, Jones County, Beat								
Date of election:	General Primary							
Nov. 7, 2023								
Treasurer of candidate's authorized committee:								
The undersigned represents that:								
(1) the payment for the broadcast time requested has been ful								
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.	ю.							
Candidate/Committee/Agency	Station Representative							
Signature:								
Collian (oler	Signature: Deletie Blaken							
Name:	Name: Debbie Blakener							
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: 10-19- a3							

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:									
Date:		The second secon							
T	HAME AS CELETRIMICE SPICE	ON DAILY							
Ad submitted to Station?	es No Date ad re	eceived: 10-24-23							
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): Toler#4-50%								
Contract #: 7180 - 00005	Station Call Letters: WBBN-FM	Date Received/Requested:							
Est. #:	Station Location: Taylorsulle, Ms.	Run Start and End Dates:							
purchased or attach separately. If station	affic system print-out) or other docu ime purchased, when spots actually will not upload the actual times spo	uments reflecting this transaction to the OPIF or y aired, the rates charged and the classes of time ots aired until an invoice is generated, the name a placed in the "Terms and Disclosures" folder in							