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

Order #: 4197-00037

Description:

Date Entered: 9/14/2023

P.O.#:

Salesperson: JOHNSON, MELISSA

Invoice Frequency: Billed at end of EOS, Sorted by Date

ALEX HODGE PO BOX 1054 LAUREL, MS 39441

On-Air Schedule

	Start Date	End Date	Station	Scheduled Time/Event	Repeated	Length	Qty	Rate	Total	M	Tu	W	<u>Th</u>	F	<u>Sa</u>	Su
1	9/18/2023	9/29/2023	WBBL-FM	06:00:00a to 10:00:00a	Weekly	:15	12	2,10	25.20	1	1	2	1	1	0	0
2	9/18/2023	9/29/2023	WBBL-FM	10:00:00a to 03:00:00p	Weekly	:15	12	2.10	25,20	1	1	2	1	1	0	0
3	9/18/2023	9/29/2023	WBBL-FM	03:00:00p to 07:00:00p	Weekly	:15	10	2,10	21,00	1	1	1	1	1	0	0
4	9/18/2023	9/29/2023	WBBN-FM	06:00:00a to 10:00:00a	Weekly	:15	16	12.75	204.00	2	1	2	1	2	0	0
5	9/18/2023	9/29/2023	WBBN-FM	10:00:00a to 03:00:00p	Weekly	:15	10	12.75	127,50	1	1	1	1	1	0	0
6	9/18/2023	9/29/2023	WBBN-FM	03:00:00p to 07:00:00p	Weekly	:15	10	12.75	127.50	1	1	1	1	1	0	0
7	9/18/2023	9/29/2023	WKZW-FM	06:00:00a to 10:00:00a	Weekly	:15	10	5.10	51.00	1	1	1	1	1	0	0
8	9/18/2023	9/29/2023	WKZW-FM	10:00:00a to 03:00:00p	Weekly	:15	10	5.10	51.00	1	1	1	1	1	0	0
9	9/18/2023	9/29/2023	WKZW-FM	03:00:00p to 07:00:00p	Weekly	:15	10	5.10	51.00	1	1	1	1	1	0	0
10	9/18/2023	9/29/2023	WKZW-HD2	06:00:00a to 10:00:00a	Weekly	:15	10	2,10	21,00	1	1	1	1	1	0	0
11	9/18/2023	9/29/2023	WKZW-HD2	10:00:00a to 03:00:00p	Weekly	:15	10	2.10	21.00	1	1	1	1	1	0	0
12	9/18/2023	9/29/2023	WKZW-HD2	03:00:00p to 07:00:00p	Weekly	:15	10	2.10	21.00	1	1	1	1	1	0	0
13	9/18/2023	9/29/2023	WXRR-FM	06:00:00a to 10:00:00a	Weekly	:15	10	8,50	85.00	1	1	1	1	1	0	0
14	9/18/2023	9/29/2023	WXRR-FM	10:00:00a to 03:00:00p	Weekly	:15	10	8,50	85,00	1	1	1	1	1	0	0
15	9/18/2023	9/29/2023	WXRR-FM	03:00:00p to 07:00:00p	Weekly	:15	10	8.50	85.00	1	1	1	1	1	0	0

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 End-Of-S	Schedule Billing Totals for	r ALEX HODGE / 4197-00037 :	
		Spot Count	Net Billing	
September	2023	80	\$0.00	
October	2023	80	\$1,001.40	

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

Accepted for ALEX HODGE By:

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	. See Invoice for actual schedule and charges.						
1. a le Holor	hereby request station time as follows:						
IDENTIFY CANDIDATE TYPE	ERAL CANDIDATE						
STAT	E OR LOCAL CANDIDATE						
	(S MUST BE COMPLETED						
Candidate, name: Alle Hold							
Authorized committee:							
Agency requesting time (and contact information):							
N/A							
Candidate's political party: Independent							
Office sought (no acronyms or abbreviations):							
Date of election: Nov. 7 ^H , 2023 General Primary							
Treasurer of candidate's authorized committee:							
The undersigned represents that:							
(1) the payment for the broadcast time requested has been fu	nished by (check one box below):						
the candidate listed above who is a legally qualified car							
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, including applicable classes and rates, discount, promotion and other sales practices (not applicable to federal candidates).							
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:						
Name: Alex Hooge	Name: Melissal Johnsu						
Date of Request to Purchase Acl Time:	Date of Station Agreement to Sell Time: 0-14-23						

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:
TO BE COMPLETED BY STATION ONLY
Ad submitted to Station? Yes No Date ad received: 9 12(12(12)
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 (a see all assets to the last to the la
Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)* Rejected – provide reason:
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):
Deputy Visability
Contract #. Date Received/Requested:
Est. #: 4197 - 0(037) Station Location: 1 1912023 Station Location: 1 1912023 Run Start and End Dates: 9118 - 912912023
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.

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:							
ŢO.	BE COMPLETED BY STATION ONLY						
Ad submitted to Station?	No Date ad received: 9142023						
Note: Must have separate PB-19 Form	ms for each version of the ad (i.e., for every ad with differing copy).						
Federal candidate certification signed (ab	pove): Yes No N/A						
Rejected – provide reason: *Upload partially accepted form, then pro Date and nature of follow-ups, if any (e.g. TWILL WA	lable						
Contract #:	Station Call Letters: Date Received/Requested: Output Date Received/Requested:						
Est. #: 4197 - 00037	Station Location Run Start and End Dates: Run Start and End Dates: 918-929203						
use this space to document schedule of ti purchased or attach separately. If station v	affic system print-out) or other documents reflecting this transaction to the OPIF or me purchased, when spots actually aired, the rates charged and the classes of time will not upload the actual times spots aired until an invoice is generated, the name information immediately should be placed in the "Terms and Disclosures" folder in						

Federal Candidate Certification:

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:									
TO BE COMPLETED BY STATION ONLY									
Ad submitted to Station? Yes No Date ad received: 9 12(12)									
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):									
First Rosandans									
Contract #: Date Received/Requested:									
W1313N-FM 9/14/2023									
Est. #: 4197-00037 Station Location! Station Location! Run Start and End Dates: 918-918/2023									
Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the ODIE 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.									