

# RECORD OF REQUEST FOR POLITICAL BROADCAST TIME OVER WTTE/WSYX/WWHO

1. Name and title of person making request \_\_\_\_\_
2. Advertising agency if one Waterfront Strategies
3. Name and address of organization paying for time \_\_\_\_\_
4. Broadcast to favor candidacy of Aft Solidarity  
Office candidate running for \_\_\_\_\_
5. Political party to which candidate belongs \_\_\_\_\_
6. Date of Request 5/19/16
7. Nature of request  
 Information as to availabilities  
 Request to purchase announcement (s) and/or program (s)  
 Request for broadcast time at no cost to candidates or supporters  
 Other request
8. Disposition made of request (attach explanatory statement if necessary)  
 Granted (give dates, times, length)  
 Denied (give reason)  
 Withdrawn (give reason)  
 Availabilities offered (give dates, times, length)
9. Subsequent developments, if any (give details, attach explanatory statement, if necessary)
10. Amount of charges  
\$ \_\_\_\_\_ Gross    \$ \_\_\_\_\_ Net    Contract #: \_\_\_\_\_

Name of WTTE/WSYX/WWHO employee completing this form:

  
\_\_\_\_\_

Copy: Public File