

**POLITICAL RECORD OF REQUEST**

(COMPLETED FORM MUST BE SENT AT TIME OF REQUEST AND WILL BE PLACED IN POLITICAL/ PUBLIC INSPECTION FILE.)

**1. Requestor Information:**

**Requestor Name:** Buying Time

**Contact Name:** Kathryn Welsh

**Phone Number:** (202) 965-5060

**Address:** 650 Massachusetts Avenue NW  
Suite 210  
Washington, DC 20001

**2. Date of request:** 9/28/2020

**3. Request received by:** Evan Butcher

**ISSUE**

Please check one:

Ad (whether national or state/local) “communicates a political matter of national importance” by referring to (1) a legally qualified candidate for any federal office; (2) any election to federal office; or (3) any political matter of national importance, whether legislative or otherwise (e.g., immigration, IRS tax code, federal cabinet or judicial appointments, etc.).

OR

Ad relates to state or local issue and does not communicate a political matter of national importance (i.e., does not refer to a federal candidate/election, or any political matter of national importance such as immigration, IRS tax code, federal cabinet or judicial appointments, etc.).

**4. Paid for by (Advertiser/sponsor name, address, phone number & contact):**

- a. **Name:** Kayser Enneking for Florida House District 21
- b. **Contact Name:** Shelby Green
- c. **Phone Number:** N/A
- a. **Address:** N/A

**5. If ad refers to any federal election or federal candidate list: ALL name(s) of candidate(s) referred to, office being sought and date of election:** Kayser Enneking, FL HD 21, 11/03/2020

**6. If ad refers to any national issues, identify ALL issues addressed (legislative or otherwise):** N/A

**7. List ALL sponsor’s chief executive officers OR members of executive committee OR board of directors:** Shelby Green, Via Enneking

**8. If only one name is listed in question 7 or on documentation provided by requestor/agency/advertiser, please certify that you have made a follow-up inquiry by initialing here:** \_\_\_\_ (initial here)

**9. Describe of the Content of the Ad:**

**10.  DMA: \_\_\_\_\_,  Interconnect (Check if Yes)**

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**Zones:**

**11. Distribution Platform(s): Check if applies:**

Linear TV;       VOD;       Digital/websites/apps

**12. Date and information provided, if any:**

**13. Disposition:**

Accepted – see attached contract details

Rejected – provide reason: [Click or tap here to enter text.](#)

**14. Additional Information:** [Click or tap here to enter text.](#)