43794-5

STATION: MARKET: KAKS-FM

ORDER#: 3200344

DATE:

AGENCY:

08/30/2022

Fayetteville (North West Arkansas), AR

AMOUNT: \$706.00

REP:

Regional Reps Non-Rep

SPOTS: 50 1655 Palm Beach Lakes Blvd.

9th Fl. Suite 903

Stn Ver: 1 Last: MOD:

WEST PALM BEACH, FL 33401 Invoices@MediaFinancial.com

MEDIA FINANCIAL SERVICES

SALES OFFICE:

CHICAGO

SLS PH: 216-233-8181

SALESPERSON:

Linley Grande

SLS FAX:

SLS EMAIL:

Linley.Grande@GenMediaPartners.com

AGENCY:

MEDIA FINANCIAL SERVICES

AGY CLI:

CONTRACT # FOR INVOICING 4431347

ADVERTISER:

Sarah For Governor

AGY PRD:

INVOICE: MEDIA FINANCIAL SERVICES

PRODUCT:

Est 1973 9/7-9/20 SARAH

HUCKABEE SANDERS RADIO

AGY EST: 1973

1655 Palm Beach Lakes Blvd.

9th FI, Suite 903

WEST PALM BEACH, FL 33401

FLIGHT:

09-07-2022 TO 9/20/2022

[X]Unwired []Spot []Mod

Invoices@MediaFinancial.com

TOT # OF WEEKS: 2

PRIM. DEMO: SEC. DEMO:

Adults 50+

[X]Cash []Trade

SPOT TYPE:

LAST SENT: 08/30/2022 11:55

COMMENTS

08/30/2022: New URGENT order. Same NAB and creative as before. Please confirm ASAP TODAY in RX if you are set up or to emma.morrow@genmediapartners.com. Thanks!

08/29/2022: PopulationBuyType: CPP.

Affidavits of Performance/Invoices are required; even for orders paid for in advance.

THIS IS AN UNWIRED NETWORK ORDER. SEND INVOICES ELECTRONICALLY OR TO INVOICES@MEDIA FINANCIAL.COM BY THE 3RD OF THE MTH AFTER THE BROADCAST MTH HAS AIRED. MFS ELECTRONIC INVOICES: RADIOINVOICES.COM: RI12580 OR 9912580; MARKETRON: 120873; SpotData: IDB#1828; EMEDIATRADE: EMT10263.

ONLY UPON PAYMENT FROM THE AGY WILL MFS REMIT TO STATION. PAYMENT TO STATION WILL BE PROCESSED WITHIN 7 DAYS AFTER RECEIPT FROM AGENCY.

Rates are agency gross. By accepting and running this order this station agrees to pay Regional Reps 15% commission on the net amount of this order. Invoices/affidavits of performance are due no later than 7 days after the end of each broadcast month.

WEEK#1-WEEK#2

9/7/2022 To 9/20/2022

QuKS

WK TOT \$353.00

WK TOTAL SPOTS 25

МС	LN	SPT TYP	DAYS	START	END TIME	LEN	START	STOP	SP/WK	RATE	WEEKLY TOTAL
	1		WThF/MTu	6:00AM	10:00AM	60	9/7/2022	9/20/2022	10	\$14.12	\$141.20
	2		WThF/MTu	3:00PM	7:00PM	60	9/7/2022	9/20/2022	10	\$14.12	\$141.20
	3		WThF/MTu	10:00AM	3:00PM	60	9/7/2022	9/20/2022	5	\$14.12	\$70.60

TOTAL	Sep								Total
SPOT	50							П	50
CASH	706.00								706.00
TOTAL	706.00		i						706.00



NATIONAL ASSOCIATION OF BROADCASTERS

Political Broadcast Agreement Form for Candidate Advertisements (PB-19)



Political Broadcast Agreement Form for Candidate Advertisements (PB-19)

This form may serve as a model agreement for the sale of political broadcast advertising time and to facilitate compliance with the Federal Communications Commission's (FCC) record retention requirements. Broadcasters seeking information on how the FCC's political broadcast rules and record retention requirements apply to their specific circumstances should seek the advice of their own attorney.

Please note:

You will be prompted to save this form after each entry of your electronic signature. Make sure to re-save the form if you enter any information after entering your electronic signature.

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A companion to this form is NAB's Political Broadcast Catechism. To assist with your understanding of the political advertising rules, an all-new Political Advertising Primer course will become available via Broadcast Education in March 2020.

Broadcast Education is NAB's home for online educational offerings, including live and on-demand webcasts, podcasts and certificate courses. For more information, visit <u>education.nab.org</u>.

NAB members have access to an array of member tools and benefits. To access additional member tools, please visit <u>nab.org/MemberTools</u>.

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.							
, KATHERINE WAGNER	, hereby request station time as follows:						
IDENTIFY CANDIDATE TYPE	AL CANDIDATE OR LOCAL CANDIDATE						
ALL QUESTIONS/BLOCKS	MUST BE COMPLETED						
Candidate name:							
Sarah Huckabee Sanders							
Authorized committee:							
Sarah For Governor							
Agency requesting time (and contact information):							
N/A MEDIUM BUYING							
Candidate's political party: REPUBLICAN							
Office sought (no acronyms or abbreviations): GOVERNOR							
Date of election: 11/8/22	General Primary						
Treasurer of candidate's authorized committee:	Treasurer of candidate's authorized committee:						
CALE TURNER PO BOX 26340 LITTLE ROCK, AR 72221 (501) 4	00-7390						
The undersigned represents that:							
(1) the payment for the broadcast time requested has been furnished by (check one box below):							
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.							
Candidate/Committee/Agency	Station Representative						
Signature: Katherine Wagner, MEDIUM BUYING Date 2022.08.26 09 19.08 -04700	Signature: Home Theyren						
Name: KATHERINE WAGNER	Name: LANCE Gresory						
Date of Request to Purchase Ad Time: 8/26/22	Date of Station Agreement to Sell Time: 8/30/22						

to an opposing candidate or, if it doe for a duration of at least four second the candidate approved the broadca broadcast or if radio programming, o	et the broadcast matter to be aired pursuant es, (2) contains a clearly identifiable photogra is and a simultaneously displayed printed sta est and that the candidate and/or the candid contains a personal audio statement by the c candidate has approved the broadcast.	sph or similar image of the candidate tement identifying the candidate, that ate's authorized committee paid for the					
Candidate/Authorized Committee/Agency							
Signature:							
Name:							
Date:							
	TO BE COMPLETED BY STATION	ONLY					
Ad submitted to Station? Note: Must have separate PB-19	Yes No Date ad receive						
Federal candidate certification signed (above): Yes No N/A							
Rejected – provide reason:	copy not yet received to determine sponsor en promptly upload updated final form when y (e.g., insufficient sponsor ID tag):						
Contract #: 43799	Station Call Letters: KAK5-FN	Date Received/Requested:					
Est. #: 1973	Station Location: 605 hen. Ar	Run Start and End Dates: 9/7/22 - 9/20/22					
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.							