



1217 W Park Road
 P.O. Box 487
 Greensburg, IN 47240
 812-663-3000

BROADCAST ORDER

Client

SANDRA LOWE

Date:

11/2/23

Agency

CSM:

Fathy Verseman

Contact

Circle all that Apply

Address

P.O. Box 146

New Order

Affidavit

City

WESTPORT

Additional Order

Exact Times

Phone

812-614-9328

Revised Order

Scripts

Cancels Previous Order

Agency Political

START/STOP DATES	DAYPART	DAYS OF WEEK							PROGRAM OR PLAN:					
		M	TU	W	TH	F	SAT	SUN	Spot Length	Cart Number	Times per Week	Number of Weeks	Unit Rate	Package Rate
11/3-11/7/23	6 ³⁰ -6P	12	12			12	12	12	:30	0930		7.00		
Weekly Amount \$		Number of Weeks							Total Amount \$					
January	April								4200.00					
February	May													
March	June													
	July													
	August													
	September													
	October													
	November								\$420.00					
	December													

Political

Accepted for Client by:

Sandra Lowe

Date:

11/2/2023

indy-lowes
 @indylowes.com

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

I, SANDRA LOWE, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE →

- FEDERAL CANDIDATE
- STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:
SANDRA LOWE

Authorized committee:
SANDRA LOWE FOR CLERK - TREASURER

Agency requesting time (and contact information):
 N/A

Candidate's political party:
INDEPENDENT

Office sought (no acronyms or abbreviations):
WESTPORT CLERK - TREASURER

Date of election: 11-7-2023 General Primary

Treasurer of candidate's authorized committee:
SANDRA LOWE

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: <u>Sandra Lowe</u>	Signature: <u>Kathy Verseman</u>
Name: <u>SANDRA LOWE</u>	Name: <u>KATHY VERSEMAN</u>
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: <u>11/2/23</u>

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: _____

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):

Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

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.

Confirmation

WTRE
 1217 West Park Road
 Greensburg IN 47240
 812-663-3000

Order # 18159
 Date Entered 11/03/2023
 Sales Person Kathy Verseman
 Billing Cycle Broadcast
 Conflict 1 Political
 Date Range 11/03/2023 - 11/07/2023
 CoOp No
 Comment Political

SANDRA LOWE
 P O BOX 146
 WESTPORT IN 47283

Station	Date Range	Time Range	Len	Schedule	Repeated	Comment	Rate	Qty	Total
1 WTRE-AM	11/03/2023-11/07/2023	06:00:00-18:00:00	00:30	12,12,0,0,12,12,12	All Weeks	Political	7.00	60	420.00
Total									420.00

Projected Billing	Count	Gross	Total
November	2023	60	420.00
		60	420.00

Customer _____ Sales Person _____