# Order #593063: Illinois F.

Date Action	Line	Comment	Ву	Total \$	# Spots	Expected GRF
10/01/20 12:49:21 PM Processed		<async process=""></async>	Ruth Nicho	\$3,740.00	110	0.00
10/01/20 12:49:19 PM Approved			Ruth Nicho	\$3,740.00	110	0.00
10/01/20 12:49:16 PM Approval Wor	kflow	[Business Manager - Business Office Approval Needed Default]	Ruth Nicho	\$3,740.00	110	0.00
10/01/20 12:48:03 PM Approval Wor	kflow	[Sales Manager - Ready Default]	Paula Willi	\$3,740.00	110	0.00
10/01/20 12:45:12 PM Ready for app	oroval	Changed Header Rev 2 to POL-ISS	Ruth Nicho	\$3,740.00	110	0.00
10/01/20 12:44:59 PM Put in Edit Mo	ode		Ruth Nicho	\$3,740.00	110	0.00
10/01/20 8:43:11 AM Processed		<sync process=""></sync>	Abraham J	\$3,740.00	110	0.00
10/01/20 8:23:47 AM Approved			Ruth Nicho	\$3,740.00	110	0.00
10/01/20 8:23:44 AM Approval Wor	kflow	[Business Manager - Business Office Approval Needed Default]	Ruth Nicho	\$3,740.00	110	0.00
10/01/20 7:27:25 AM Approval Wor	kflow	[Sales Manager - Ready Default]	Paula Willi	\$3,740.00	110	0.00
10/01/20 7:24:30 AM Ready for app	oroval	ready	Bobby Rad	\$3,740.00	110	0.00
09/28/20 9:13:49 AM Unapproved		No payment yet	Paula Willi	\$3,740.00	110	0.00
09/28/20 8:10:44 AM Ready for app	oroval	Ready	Keith Palm	\$3,740.00	110	0.00
09/28/20 8:08:39 AM New order cre	eated	<new order=""></new>	Keith Palm	\$0.00	0	0.00

[Sorted by: Date]

## **ORDER**

Orders	Order / Rev:	593068	<u></u>		
	Alt Order #:				
	Product Desc:	No Progressive Tax 60s			
	Estimate:			WJBC-AM	
	Flight Dates:	10/05/20 - 11/03/20	Primary AE:	Keith Palmgren	
	Original Date / Rev:	09/28/20 / 10/01/20	Sales Office:	L-BLO	
	Order Type:	GENERAL	Sales Region:	Local	
Agency	Name:	Illinois Farm Bureau			
	Buying Contact:		Billing Type:	Cash	
	Billing Contact:		Billing Calendar:	Broadcast	
		PO Box 2901	Billing Cycle:	EOM/EOC	
		Bloomington, IL 61702	Agency Commission:	0%	
Advertiser	Name:	Illinois Farm Bureau			
	Demographic:	A25-54	New Business Thru:		
	Product Codes:	Farming/Agriculture	Advertiser External ID:		
	Revenue Code 1:	DIR	Agency External ID:		
	Revenue Code 2:	POL-ISS	Unit Code:	General	
	Revenue Code 3:	GEN	Order Separation:	00:15:00	
	Priority:	P-100			

### Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
09/28/20	10/25/20	48	\$2,016.00	\$2,016.00
10/26/20	11/03/20	22	\$924.00	\$924.00

### Totals

lotais				
Month	# Spots	Gross Amount	Net Amount	Rating
October 2020	48	\$2,016.00	\$2,016.00	0.00
November 2020	22	\$924.00	\$924.00	0.00
Totals	70	\$2,940.00	\$2,940.00	0.00

#### **Account Executives**

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Keith Palmgren	L-BLO	Local	Start Of Order - End Of Order	100%

Ln Ch	Start	End	Inventory Code	Break	Start/End	Γime Days	Len S	oots	Rate Pri	Rtg Type	Spots	Amount
N 1 WJBCA	10/05/20	0 10/30/20	M-F Prime	CM	6a-7p	MTWTF	1:00	16	\$42.00 P-60	0.00 NM	64	\$2,688.00
			M-F									
<u>Star</u>	rt Date	End Date	<u>Weekdays</u>	Spots/Week	<u>Rate</u>	Rating						
Week: 10/0	05/20	10/11/20	MTWTF	16	\$42.00	0.00						
Week: 10/	12/20	10/18/20	MTWTF	16	\$42.00	0.00						
Week: 10/	19/20	10/25/20	MTWTF	16	\$42.00	0.00						
Week: 10/2	26/20	11/01/20	MTWTF	16	\$42.00	0.00						
N 2 WJBCA	11/02/20	11/03/20	M-F Prime	CM	6a-7p	MT	1:00	6	\$42.00 P-60	0.00 NM	6	\$252.00
			M-F									
Star	rt Date	End Date	<u>Weekdays</u>	Spots/Week	Rate	<u>Rating</u>						
Week: 11/0	02/20	11/08/20	MT	6	\$42.00	0.00						
										Totals	70	\$2,940.00

# ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

Kevin S. Semlow	The state of the s				
	_, hereby request station time as fo	ollows: See Order for proposed			
schedule and charges. See Invoice for actual schedule and charges.					
Check one:	307.				
issue of public importance (e.g., subject of controversy or discus	relating to any political matter of national for federal office; (2) an election to federal health care legislation, IRS tax code, etc.); ossion at the national level.	or (4) a political issue that is the			
only to a state or local issue).	message relating to any political matter of	national importance (e.g., relates			
ALL QUE	STIONS/BLOCKS MUST BE CON	MPLETED			
Station time requested by: NO Progressi					
Agency name: NO Progressive Tax - Illinois	s Farm Bureau Political Action Committee	OW			
Address: PO Box 1605, Bloomington, IL 61	702-1605				
Contact: Kevin S. Semlow	Phone number: 309-557-2308	Email: ksemlow@ilfb.org			
Name of advertiser/sponsor (list entity's committees] with no acronyms; name m	full legal name as disclosed to the Fede ust match the sponsorship ID in ad):	Land to the state of the state			
Name: NO Progressive Tax - Illinois Farm E					
Address: PO Box 1605, Bloomington, IL 61	702-1605				
Contact: Kevin S. Semlow	Phone number: 309-557-2308	Email: ksemlow@ilfb.org			
Station is authorized to announce the ti	me as paid for by such person or entity.				
List ALL of the chief executive officers o group(s) of the advertiser/sponsor (Use	r members of the executive committee of separate page if necessary.):	or board of directors or other governing			
Chiarman - Dennis Green (1701 Towanda A Treasurer - Alan Dodds (1701 Towanda Ave	ve., Bloomington IL 61701) ., Bloomington IL 61701)				
By signing below, advertiser/sponsor representative committee and board of directors	esents that those listed above are the only ors or other governing group(s).	y executive officers, members of the			
If ad refers to a federal candidate(s) or f	ederal election, list ALL of the following	:			
Name(s) of every candidate referred to:					
Office(s) sought by such candidate(s) (no	o acronyms or abbreviations):				
Date of election:	The state of the s				
Clearly identify <b>EVERY</b> political matter of ad (no acronyms); use separate page if	of national importance referred to in the necessary:	e ′ ✓ N/A			

## THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING. The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement. Advertiser/Sponsor Station Representative Digitally signed by Kevin S. Semlow Signature: Kevin S. Semlow Signature: Date: 2020.09.24 09:48:58 -05'00' Name: Kevin S. Semlow Ruth Ni chols Name: Date of Request to Purchase Ad Time: See Rate Schedule Date of Station Agreement to Sell Time: 10/1/20 TO BE COMPLETED BY STATION ONLY Ad submitted to station? No Date ad received: . Note: Must have separate PB-19 forms (or the equivalent, e.g., addendums) for each version of the ad (i.e., for every ad with differing copy). If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided. Disposition: Accepted Accepted IN PART (e.g., ad not received to determine content)\* Rejected - provide reason (optional):

Est. #:

960 4962

Date and nature of follow-ups, if any:

Station Call Letters: WBNQ-FM, WBWN-FM WJBC-AM, WJBC-FM, 10/1/20

Date Received/Requested:

\*Upload partially accepted form, then promptly upload updated final form when complete.

Station Location: Blooming ton, IL

Run Start and End Dates:

Pontiac, IL

10/5/20-11/3/20

## For national issue ads only (not required for state/local issue ads):

Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.