



ARIZONA'S HOMETOWN RADIO GROUP
 P.O. Box 26523 Prescott Valley, AZ 86312
 Phone (928) 445-3289
 Toll Free 1-800-264-5449
 Fax (928) 442-0448

Order Date: 10/13/22
 Advertiser Name: Banson Per House
 Agency: Sindan Per AZ House
 Billing Name: _____
 Mailing Address: _____
 City/State/Zip: _____
 Telephone/Fax: _____
 Authorized Person: Jay Ruby
 Title: Media Buyer
 Signature: Jay Ruby
 Website: _____
 Invoice: _____
 Mail E-mail
 E-mail Address: Jay.Ruby3@gmail.com

<input checked="" type="checkbox"/> KPPV	Start: <u>10/14/22</u>	Stop: <u>10/20/22</u>	# Months: <u>1</u>	Cost Per Month: <u>258.72</u>	Order ID: _____
<input type="checkbox"/> KDDL	Start: _____	Stop: _____	# Months: _____	Cost Per Month: _____	Order ID: _____
<input type="checkbox"/> KQNA	Start: _____	Stop: _____	# Months: _____	Cost Per Month: _____	Order ID: _____
<input checked="" type="checkbox"/> JACK	Start: <u>10/14/22</u>	Stop: <u>10/20/22</u>	# Months: <u>1</u>	Cost Per Month: <u>184.80</u>	Order ID: _____
<input type="checkbox"/> JUAN	Start: _____	Stop: _____	# Months: _____	Cost Per Month: _____	Order ID: _____
<input type="checkbox"/> KXBB	Start: _____	Stop: _____	# Months: _____	Cost Per Month: _____	Order ID: _____

Acct/Rep: Diana Tucker New Renewal
 Approved by AZ Hometown Radio

Days	Time Range	Station	# of Ads	Type	Cost	Length
M-Sun	5a-8p	KPPV	28	C	9.24	:60
M-Sun	5a-8p	JACK	28	C	10.60	:60

Remote: _____
 Date: _____ Hours: _____ Cost Per Hour: _____ Total: _____
 Sponsorship: _____ FOR KXBB ONLY: _____
 Time/Feature/Station: _____ Primary Domain Portal: _____
 Website: _____
 Start: _____ Stop: _____ Type: _____ Cost Per Month: _____
 Promotion: _____
 Name: _____ Prize: _____

*Please use card ending in 59618
 & NAB on P.O. for General*

Billing Basis: Per Broadcast \$ _____ ea. Per Package/mo. \$ 443.52 mo.
 Invoice Copies: 1 Script/Affidavit Agency/Commission % National Rep Commission %

Payment Type: Bill Collect Pre-Bill Credit Card
 Billing Statement Cycle: _____
 Calendar: Broadcast
 End of Schedule: Demand
 Weekly: None Other:
 Additional Billing Instructions:
credit card
attached please
change 10/22/22

Invoice Type:
 Customer ID: _____
 None Times Only
 Summary Detail/Affidavit
 Times Affidavit Detail
 Notated
 Co-op
 Production Codes:
 Primary: 39
 Secondary: _____
 Silent Shopper Coast

Check Here:
 If Political Govt
 Non-Profit
 Donation/Sponsor
 P.O. Submitted
 If not, when will it be submitted?
 Ad from what source?

Gross Net
 Rate: \$ 443.52
 Sub: _____
 Tax: 12.20
 Monthly Due \$ 455.72
 NSR: \$20 Fee For NSF: _____

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CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, John Ruby, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Neil Sinclair

Authorized committee:

Sinclair for AZ House

Agency requesting time (and contact information):

N/A

Candidate's political party:

Democratic

Office sought (no acronyms or abbreviations):

Arizona State House Legislative District 1

Date of election:

November 8th

General

Primary

Treasurer of candidate's authorized committee:

Cathy Ransom

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:

J. Ruby

Signature:

Dian Tucker

Name: John Ruby

Name:

Dian Tucker

Date of Request to Purchase Ad Time: 26 September 2022

Date of Station Agreement to Sell Time:

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: 9/20/22

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:
KPPV & JACK

Date Received/Requested:

10/13/22

Est. #:

Station Location:
Prescott AZ

Run Start and End Dates:

10/14 - 10/20/22

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.