



ARIZONA'S HOMETOWN RADIO GROUP

P.O. Box 26523 Prescott Valley, AZ 86312

Phone (928) 445-8289

Toll Free 1-800-264-5449

Fax (928) 442-0448



| Station | Start | Stop | # Months | Cost Per Month | Order ID |
|--|---------|------|----------|----------------|----------|
| <input checked="" type="checkbox"/> KPPV | 9/12/22 | 10/9 | 1 | 1634.00 | |
| <input checked="" type="checkbox"/> KDDL | 9/12/22 | 10/9 | 1 | 766.50 | |
| <input checked="" type="checkbox"/> KQNA | 9/12/22 | 10/9 | 1 | 1,209.81 | |
| <input checked="" type="checkbox"/> JACK | 9/12/22 | 10/9 | 1 | 766.5 | |
| <input checked="" type="checkbox"/> JUAN | 9/12/22 | 10/9 | 1 | 613.20 | |
| <input type="checkbox"/> KXBB | | | | | |

Order Date 9/1/22 Secretary

Advertiser Name Adeiran Fortes of State

Agency Anderson Advertising

Billing Name Ted Anderson

Mailing Address 5800 E Thomas Rd #100

City/State/Zip Scottsdale Az 85251

Telephone/Fax 480-945-2229

Authorized Person Ted Anderson

Title Media Buyer

Signature Please See Attached

Website

Invoice: Mail: E-mail:

E-mail Address Ted@Anderson-adv.com

Acct. Rep Kum Lopez New Renewal Approved by Az Hometown Radio

| Days | Time Range | Station | # of Ads | Type | Cost | Length |
|------|------------|---------|----------|------|------|--------|
|------|------------|---------|----------|------|------|--------|

See Attached Schedule

Remote: Date _____ Hours _____ Cost Per Hour _____ Total _____

Sponsorship _____ FOR KXBB ONLY: _____ Primary Domain Portal _____

Website: Start _____ Stop _____ Type _____ Cost Per Month _____

Promotion: Name _____ Prize _____

Billing Basis: Per Broadcast \$ _____ ea. Per Package/mo. \$ _____ mo.

Invoice Copies 1 Script Affidavit Y N Agency Commission 15% National Rep Commission _____%

Payment Type: Bill Credit Card

Collect Pre-Bill Credit Card

Billing Statement Cycle:

Calendar Broadcast

End of Schedule Demand

Weekly None Other

Additional billing instructions:

Invoice Type:

Customer ID _____

None Times Only

Summary Detail Affidavit

Times Affidavit Detail

Notarized Y N

Co-op Y N

Production Codes:

Primary _____

Secondary _____

Silent Shopper Cost _____

Check Here:

If Political Govt

Non-Profit

Donation/Sponsor

P.O. Submitted Y N

If not, when will it be submitted?

Ad from what source?

Gross Net

Rate: \$ 8,111.99 gross

+/- _____

Sub _____

Tax: 116.38

Monthly Due \$ Net

6912.65

Note: \$20 Fee For NSF Checks

DISCLAIMER: Our stations do not discriminate in the acceptance of placement of advertising on the basis of race, gender or ethnicity. Any order for advertising or advertising contract which includes any restrictions on the placement of the advertising based on race, gender or ethnicity will not be accepted.

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Jeanne Lunn, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

- FEDERAL CANDIDATE
 STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

ADRIAN FONTES

Authorized committee:

Fontes for AZ

Agency requesting time (and contact information):

N/A

Candidate's political party:

Democrat

Office sought (no acronyms or abbreviations):

Secretary of State

Date of election:

November 8, 2022

General [] Primary

Treasurer of candidate's authorized committee:

JEANNE LUNN

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.

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: Name: <u>Jeanne Lunn</u> | Signature: Name: <u>Kim Lopez</u> |
| Date of Request to Purchase Ad Time: <u>7/12/2022</u> | Date of Station Agreement to Sell Time: <u>9/1/22</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: JETHRO CUMM

Date: 7-12-22

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No

Date ad received: _____

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 (optional): _____

*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, KDDL, KQNA, Jack

Date Received/Requested: 9/8

Est. #:

Station Location: Suan

Run Start and End Dates: 9/12 - 10/9

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.