CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.			
I, M. Jane Puszkar	, hereby request station time as follows:		
IDENTIFY CANDIDATE TYPE FEDERAL CANDIDATE STATE OR LOCAL CANDIDATE			
ALL QUESTIONS/BLOCKS MUST BE COMPLETED			
Candidate name: Mary Jane Puszkar			
Authorized committee: Friends of Jane Puszkar			
Agency requesting time (and contact information): N/A			
Candidate's political party: Republican			
Office sought (no acronyms or abbreviations): Francis Howell School Board			
Date of election: 04-14-2023	General Primary		
Treasurer of candidate's authorized committee: Ron Puszkar, Treasurer			
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: Rubbar	Signature:		
Name: M. JANE PUSZKAR	Name:		
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time:		

to an opposing candidate or, if it for a duration of at least four sec the candidate approved the bro broadcast or if radio programmi	s that the broadcast matter to be aired purs t does, (2) contains a clearly identifiable pho conds and a simultaneously displayed printer adcast and that the candidate and/or the candidate	suant to this disclosure either (1) does not refered to tograph or similar image of the candidate and statement identifying the candidate, that and and and and and and are the candidate that identifies the candidate, the candidate, the candidate that identifies the candidate, the candidate candidate, the candidate, the candidate, the candidate candidate, the candidate, the candidate, the candidate candidate candidate, the candidate candidate candidate candidate.	
Candidate/Authorized Committee/Agency			
Signature:			
Name: N/A			
Date:			
	TO BE COMPLETED BY STATI	ONONLY	
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:	
use this space to document scl	nedule of time purchased, when spots actual if station will not upload the actual times s	ocuments reflecting this transaction to the OPIF or ally aired, the rates charged and the classes of time spots aired until an invoice is generated, the name be placed in the "Terms and Disclosures" folder in	