



Political Broadcast Agreement Form for Candidate Advertisements (PB-19)



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This form may serve as a model agreement for the sale of political broadcast advertising time and to facilitate compliance with the Federal Communications Commission's (FCC) record retention requirements. Broadcasters seeking information on how the FCC's political broadcast rules and record retention requirements apply to their specific circumstances should seek the advice of their own attorney.

Please note:

You will be prompted to save this form after each entry of your electronic signature. Make sure to re-save the form if you enter any information after entering your electronic signature.

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A companion to this form is NAB's Political Broadcast Catechism. To assist with your understanding of the political advertising rules, an all-new Political Advertising Primer course will become available via Broadcast Education in March 2020.

Broadcast Education is NAB's home for online educational offerings, including live and on-demand webcasts, podcasts and certificate courses. For more information, visit <u>education.nab.org</u>.

NAB members have access to an array of member tools and benefits. To access additional member tools, please visit nab.org/MemberTools.

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. S	See Invoice for actual schedule and charges.					
1 Spenners (Spen H	, hereby request station time as follows:					
11						
FEDER	RAL CANDIDATE					
IDENTIFY CANDIDATE TYPE STATE	OR LOCAL CANDIDATE					
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED					
Candidate name:						
Spencer Gosci	<i>*</i>					
Authorized committee:	OR SOUTH DAKOTA					
Spencer Grosch to	OR SOUTH LAKOTA					
Agency requesting time (and contact information):						
N/A						
Candidate's political party;						
KEPUBLICAN						
Office sought (no acronyms or abbreviations):						
House of Repres						
Date of election: /	General					
Treasurer of candidate's authorized committee:						
SPENCER GOSCH						
The undersigned represents that:						
(1) the payment for the broadcast time requested has been fur	nished by (check one box below):					
the candidate listed above who is a legally qualified car						
the authorized committee of the legally qualified candid						
(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 DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY					
Candidate/Committee/Agency	Station Representative					
Signature:	Signature: Kub Hun Mous					
Name: Spancer GOSCH	Name: Kristan Morns					
Date of Request to Purchase Ad Time: 5/30/21/ Date of Station Agreement to Sell Time: 6/30/21/						

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: 530 7074 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 #: Cove ## Station Call Letters: Date Received/Requested:								
Est. #: See AH Station Location: See AH Station Location Location: See AH Station Location L								
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.

Hub City Radio 3304 S Hwy 281 PO Box 1930 Aberdeen, South Dakota 57401

Phone: (605) 226-3632

Email: frontoffice@hubcityradio.com

Spencer Gosch for House

104 North Riverview Drive

Glenham, South Dakota 57631



Advertiser: Order #:

Date Entered: Last Modified:

Product: Salesperson:

Billing Cycle:

Estimate #:

Spencer Gosch for House

3032246951507

05/30/2024 05/30/2024

Kristan Political

Calendar Month

Order Name: Spencer Gosch For House Current Order State: Pending Approval Last Published on: Never published

Order Date Range: 05/31/2024 through 06/04/2024 (1 weeks)

Media Outlets: KGIM-FM, KNBZ-FM, KSDN-HD2

On-Air Schedule

												1/2/12/17	7.			
#	Dates	Station	Time/Program	Len	Мо	<u>Tu \</u>	<u>Ne</u>	<u>Th</u>	Fr	Sa	Su S	S/W		Rate	Qty	<u>Total</u>
1	05/31/24-06/04/24	KNBZ-FM	06:00AM-07:00PM	30	3	3			3	3	3	15		7.90	15	118.50
2	05/31/24-06/04/24	KGIM-FM	06:00AM-07:00PM	30	3	3			3	3	3	15		8.30	15	124.50
3	05/31/24-06/04/24	KSDN-HD2	06:00AM-07:00PM	30	3	3			3	3	3	15		4.50	15	67.50

Station Totals

Station	On-Air Count	Digital Count	Web Count	Other Count	Gross Billing	Net Billing
KGIM-FM	15	0	0	0	\$124.50	\$124.50
KNBZ-FM	15	0	0	0	\$118.50	\$118.50
KSDN-HD2	15	0	0	0	\$67.50	\$67.50
Totals	45	0	0	0	\$310.50	\$310.50

Total Charges: \$310.50 **Total Net:** \$310.50

Billing Net Billing
\$62.10 \$62.10
\$248.40 \$248.40

Approvals

Date/Time	<u>User</u>	<u>Title</u>	Approval Type	<u>Status</u>
None				