

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

FEDERAL CANDIDATE

STATE/LOCAL CANDIDATE

**To Avail Themselves of The Lowest Unit Charge During a Political Window, Federal Candidates Must Sign The Certification On Page 3**

<b>Station and Location:</b> <span style="font-size: 1.2em;">KAPB FM 97.7</span>	<b>Date:</b> <span style="font-size: 1.2em;">9-27-19</span>
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I, Donald Milligan,  
 being/on behalf of: Donald Milligan, a legally  
 qualified candidate of the Republican political  
 party for the office of: State Rep.  
 in the Primary  
 election to be held on: 10-12-19

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
60	36 spots	12 days		3x/1s	

**Total Charges:**  $\$300$  <sup>(2)</sup>  $\times$   $\$8$  per spot =  $\$288$

For programming that, in whole or in part, "communicates a message relating to any political matter of national importance," list the matters below:

[Empty box for listing matters of national importance]

I represent that the payment for the above described broadcast time has been furnished by:

\_\_\_\_\_

and you are authorized to announce the time as paid for by such person or entity.

I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

\_\_\_\_\_

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

**To Be Signed By Candidate or Authorized Committee**

9/27/19  
Date

[Handwritten Signature]  
Signature

**To Be Signed By Station Representative**

Accepted

Accepted in Part

Rejected

[Handwritten Signature]  
Signature

Sami Sherman  
Printed Name

Office Manager  
Title



P O BOX 7  
 MARKSVILLE, LA. 71351  
 318-253-5272

# KAPB FM Order Confirmation

OrderID: 0970-001

Sponsor: DONALD MILLIGAN  
 Product: DONALD MILLIGAN  
 Estimate/PO:  
 AccountRep: HOUSE  
 BillingCycle: Calendar Month  
 InvoiceType: None-Statement Only  
 Run Dates: 9/27/2019 - 10/12/2019  
 Items Ordered: 36  
 Ordered Amount: \$288.00

Scheduled Station(s): KAPB FM  
 DONALD MILLIGAN

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Page 1

Run Dates	Run Weeks	Run Times	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Week Total	Length	Description	Avail Type	Copy ID	Qty	Item Cost	Total Cost
01 9/30/2019 - 10/12/2019	All Weeks	06:00 AM - 07:00 PM	3	3	3	3	3	3		18	:30	Spot		COM-DA0485	36	8.00	288.00

Calendar Month Projected Billing:

Month	Projected Cost	Month	Projected Cost	Month	Projected Cost	Month	Projected Cost
Jul-19	0.00	Aug-19	0.00	Sep-19	24.00	Q3-2019	24.00
Oct-19	264.00	Nov-19	0.00	Dec-19	0.00	Q4-2019	264.00