CONTRACT



WETM
5000 Riverside Dr
Building 5 Suite 200
Irving, TX 75039
(607) 733-5518

And:

McLaughlin & Associates 566 South Route 303 Blauvelt, NY 10913

| | Contract / Revision | | Alt Order # | | |
|------------------------|---------------------|--------------------|-------------|-------------|----------------|
| | 3257820 | / | | 27570522 | |
| Advertiser | | | Ori | ginal Date | |
| POL/New York State Con | y | 1 | 0/28/21 | / 10/28/21 | |
| Contract Dates | Estimate # | | | | |
| 10/29/21 - 11/02/21 | | | | | |
| Product | | | | | · |
| NYSCP - ELMIRA | | | | | |
| Order Brand | Billing Cycle | Billing (| Cal | endar | Cash/Trade |
| | ЕОМ | Broado | ast | | Cash |
| | Property | Accour | nt E | xecutive | Sales Office |
| | WETM | Millennium Washing | | n Washingto | Millennium/Was |
| | Special Handl | ing | | | |
| | Demographic | | | | |
| | Adults 35+ | | | | |
| | | | | | |
| | | | | | |
| | Agy Code | Adverti | ser | Code | Product 1/2 |
| | | | | | |
| | Agency Ref | | | Advertiser | Ref |
| | IN15546/MO2 | 480/SP | 1 | SP10948 | |
| | | | | | |

| *Line Ch Start Date End Date Description | Start/End Time | Spots/ Days Length Week | Rate Typ | e Spots | Amount |
|--|---|----------------------------|----------|---------|-------------|
| N 1 WETM 10/31/21 10/31/21 NFL Sunday Game Start Date End Date Weekdays Spots/Week Week: 10/25/21 10/31/21 S 3 | 8:00 PM-11:30 PM <u>Rate</u> \$2,500.00 | :30 | NI | 3 | \$7,500.00 |
| N 2 WETM 10/30/21 10/30/21 Notre Dame Football Start Date End Date Weekdays Spots/Week Week: 10/25/21 10/31/21 5- 4 | 7:30 PM-11:00 PM <u>Rate</u> \$650.00 | :30 | NI | 1 4 | \$2,600.00 |
| N 3 WETM 10/31/21 10/31/21 Nascar <u>Start Date</u> <u>End Date</u> <u>Weekdays</u> <u>Spots/Week</u> Week: 10/25/21 10/31/21S 4 | 2:00 PM-6:00 PM <u>Rate</u> \$750.00 | :30 | NI | 4 | \$3,000.00 |
| | | Totals | | 11 | \$13,100.00 |

| Time Period | # of Spots | Gross Amount | Agency Comm. | Net Amount |
|--------------------|------------|--------------|--------------|-------------|
| 09/27/21 -10/31/21 | 11 | \$13,100.00 | (\$1,965.00) | \$11,135.00 |
| Totals | 11 | \$13,100.00 | (\$1,965.00) | \$11,135.00 |

| Signature: | Date: |
|------------|-------|
|------------|-------|

(* Line Transactions: N = New, E = Edited, D = Deleted)

Notwithstanding to whom bills are rendered, advertiser, agency and service, jointly and severally, shall remain obligated to pay to station the amount of any bills rendered by station within the time specified and until payment in full is received by station. Payment by advertiser to agency or to service or payment by agency to service, shall not constitute payment to station. Station will not be bound by conditions, printed or otherwise contracts, insertion orders, copy instructions or any correspondence when such conflict with the above terms and conditions. Two week advance cancellation notice is required unless otherwise specified.

ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

| , McLaughlin Media | _, hereby request station time as fo | ollows: See Order for proposed | |
|--|--|---|--|
| schedule and charges. See Invoice for actual schedule and charges. | | | |
| Check one: | _ | | |
| (1) a legally qualified candidate issue of public importance (e.g. subject of controversy or discu | relating to any political matter of national e for federal office; (2) an election to federa , health care legislation, IRS tax code, etc.); of ssion at the national level. message relating to any political matter of | al office; (3) a national legislative or (4) a political issue that is the | |
| only to a state or local issue). | 3 3 1 | (0.3-7, 0.3-3-3 | |
| ALL QUE | STIONS/BLOCKS MUST BE COM | MPLETED | |
| Station time requested by: NYSCP | *************************************** | | |
| Agency name: McLaughlin Media | | | |
| Address: 566 South Route 303 Bla | uvelt, NY 10913 | | |
| Contact: Marianne Campbell | Phone number: 203-966-9757 | Email: mcampbell@mclaughlinonline.com | |
| Name of advertiser/sponsor (list entity's committees] with no acronyms; name m | full legal name as disclosed to the Fede ust match the sponsorship ID in ad): | ral Election Commission [for federal | |
| Name: New York State Conservative Party | | | |
| Address: 486 78 th Street Brooklyn, N.Y. 1 | 1209 | | |
| Contact: Marianne Campbell | Phone number: 203-966-9757 | Email: mcampbell@mclaughlinonline.com | |
| Station is authorized to announce the ti | me as paid for by such person or entity. | | |
| List ALL of the chief executive officers o group(s) of the advertiser/sponsor (Use | r members of the executive committee of separate page if necessary.): | or board of directors or other governing | |
| Chairman: Gerard Kassar Treasurer: Frances Vella-Marrone | | | |
| Trousdrof. Trumoco vella-wialfone | | | |
| | | | |
| By signing below, advertiser/sponsor representation executive committee and board of directors | resents that those listed above are the only ors or other governing group(s). | executive officers, members of the | |
| If ad refers to a federal candidate(s) or f | ederal election, list ALL of the following: | N/A | |
| Name(s) of every candidate referred to: | | | |
| Office(s) sought by such candidate(s) (n | o acronyms or abbreviations): | | |
| Date of election: | | | |
| Clearly identify EVERY political matter of ad (no acronyms); use separate page if | of national importance referred to in the necessary: | √ N/A | |
| | | | |

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

| Advertiser/Sponsor | | Station Representative | | |
|---|-----------------------|---|--|--|
| Signature: MARIANNE CAMPBELL OUTSTAND COMPRESSION OF THE STAND OF THE | | Signature: | | |
| Name: Marianne Campbell | | Name: Steven Lunger, | | |
| Date of Request to Purchase Ad Time: | 10.20.2021 | Date of Station Agreement to Sell Time: /// / / / / / / / / / / / / / / / / / | | |
| TO BE COMPLETED BY STATION ONLY | | | | |
| Ad submitted to station? | No | Date ad received: /dlr/(a. | | |
| Note: Must have separate PB-19 forms for each version of the ad (i.e., for every ad with differing copy). | | | | |
| If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided. Disposition: Accepted Accepted Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason: *Upload partially accepted form, then promptly upload updated final form when complete. Date and nature of follow-ups, if any: | | | | |
| | | | | |
| Contract #: 3257820 | Station Call Letters: | Date Received/Requested: | | |
| Est. #: | Station Location: | Run Start and End Dates: | | |
| For national issue ads only (not require | ed for state/local is | esua adeli | | |

Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.