

# DISTELL RADIO GROUP

STATION ISSUES PUBLIC SERVICE & PUBLIC AFFAIRS

4TH QUARTER – 2022

KWBY 940 AM

The following public service announcements on the attached sheet were during the period OCTOBER 1<sup>st</sup> and DECEMBER 31<sup>ST</sup> 2022 on the station indicated. All Public Service and Public Affairs programs were aired on the stations listed above.

A handwritten signature in black ink that reads "Chitra Lekha Gade". The signature is written in a cursive style with a long horizontal stroke at the end.

CHITRALEKHA GADE  
CHIEF ADMINISTRATIVE OFFICER

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22100339  
 Invoice Date: 10/31/2022  
 Account ID: 0054  
 Order ID: 0054-375  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S PUBLIC AFFAIRS PROGRAM LA PANTERA for P.O./Estimate # PAP LA PANTERA  
 PSA- S PUBLIC AFFAIRS PROGRAM

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/2/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	UPDATED COVID 19 BOOSTER	0.00
10/9/2022	02:02 PM	15:00	PUBLIC AFFAIRS PROGRAM	UPDATED COVID 19 BOOSTER	0.00
10/16/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	Dr Emilio Debess OHA Viruela del Mono	0.00
10/23/2022	01:59 PM	15:00	PUBLIC AFFAIRS PROGRAM	Dr Emilio Debess OHA Viruela del Mono	0.00
10/30/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	PROGRAMA REHABILITACION ADICCI	0.00

5 Total Items

Total Cost:

\$0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Amount Due:

**\$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22100337  
 Invoice Date: 10/31/2022  
 Account ID: 0054  
 Order ID: 0054-318  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/1/2022	04:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/1/2022	02:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
10/1/2022	04:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
10/2/2022	04:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
10/2/2022	03:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
10/2/2022	06:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/3/2022	04:41 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/3/2022	09:47 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/3/2022	04:45 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
10/4/2022	06:20 AM	:30	PSA	DISTRACTED DRIVING	0.00
10/4/2022	02:43 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
10/4/2022	09:21 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
10/5/2022	01:42 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
10/5/2022	04:20 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/5/2022	07:45 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
10/6/2022	03:42 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/6/2022	03:44 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/6/2022	08:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
10/7/2022	04:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/7/2022	08:49 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/7/2022	04:44 PM	:30	PSA	DISTRACTED DRIVING	0.00
10/8/2022	04:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
10/8/2022	09:45 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
10/8/2022	03:44 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
10/9/2022	09:45 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
10/9/2022	11:21 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
10/9/2022	05:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
10/10/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/10/2022	07:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
10/10/2022	04:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/11/2022	12:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/11/2022	02:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
10/11/2022	03:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
10/12/2022	12:41 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
10/12/2022	09:42 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
10/12/2022	11:43 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBX 940 AM Invoice

Invoice ID: 22100337  
 Invoice Date: 10/31/2022

Sponsor: PSA- S  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/13/2022	01:45 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/13/2022	03:46 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
10/13/2022	09:18 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/14/2022	05:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
10/14/2022	02:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/14/2022	10:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/15/2022	02:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/15/2022	07:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/15/2022	10:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
10/16/2022	12:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/16/2022	03:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/16/2022	07:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
10/17/2022	09:42 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/17/2022	03:43 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/17/2022	08:43 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
10/18/2022	04:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/18/2022	08:42 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/18/2022	03:45 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/19/2022	01:41 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/19/2022	11:22 AM	:30	PSA	DISTRACTED DRIVING	0.00
10/19/2022	06:41 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/20/2022	12:42 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/20/2022	09:49 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/20/2022	01:46 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
10/21/2022	12:24 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/21/2022	05:23 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/21/2022	10:42 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/22/2022	09:45 AM	:30	PSA	DISTRACTED DRIVING	0.00
10/22/2022	01:44 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/22/2022	03:42 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/23/2022	07:42 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/23/2022	04:41 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/23/2022	10:38 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
10/24/2022	01:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
10/24/2022	08:42 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/24/2022	11:22 AM	:30	PSA	DISTRACTED DRIVING	0.00
10/25/2022	09:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/25/2022	12:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/25/2022	08:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
10/26/2022	09:44 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/26/2022	03:23 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/26/2022	10:42 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/27/2022	02:43 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/27/2022	05:46 PM	:30	PSA	DISTRACTED DRIVING	0.00
10/27/2022	10:44 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/28/2022	06:26 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/28/2022	03:25 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/28/2022	10:42 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
10/29/2022	02:43 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/29/2022	06:42 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00

Continued



# KWBY 940 AM Invoice

Invoice ID: 22100337  
Invoice Date: 10/31/2022

Sponsor: PSA- S  
PSA- S

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/29/2022	07:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
10/30/2022	06:44 AM	:30	PSA	DISTRACTED DRIVING	0.00
10/30/2022	07:22 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
10/30/2022	01:44 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
10/31/2022	05:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
10/31/2022	10:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
10/31/2022	04:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00

93 Total Items

Total Cost:

\$0.00

Amount Due:

\$0.00

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22100338  
 Invoice Date: 10/31/2022  
 Account ID: 0054  
 Order ID: 0054-374  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S FRASES EN EL TIEMPO for P.O./Estimate # FRASES EN EL TIEMPO  
 PSA- S FRASES EN EL TIEMPO

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/1/2022	06:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
10/2/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/3/2022	02:41 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/4/2022	07:20 AM	:15	PSA	FRASES BUSTOS 1	0.00
10/5/2022	07:22 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/6/2022	12:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
10/7/2022	02:43 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/8/2022	03:44 PM	:15	PSA	FRASES BUSTOS 2	0.00
10/9/2022	06:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/10/2022	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/11/2022	02:40 PM	:15	PSA	FRASES BUSTOS 4	0.00
10/12/2022	10:44 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/13/2022	07:44 AM	:15	PSA	FRASES BUSTOS 5	0.00
10/14/2022	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/15/2022	12:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
10/16/2022	04:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/17/2022	12:42 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/18/2022	10:43 AM	:15	PSA	FRASES BUSTOS 3	0.00
10/19/2022	05:39 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/20/2022	04:23 PM	:15	PSA	FRASES BUSTOS 4	0.00
10/21/2022	11:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/22/2022	02:23 PM	:15	PSA	FRASES BUSTOS 2	0.00
10/23/2022	05:42 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/24/2022	04:21 AM	:30	PSA	FRASES BUSTOS 6	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

Invoice ID: 22100338  
Invoice Date: 10/31/2022

Sponsor: PSA- S / PSA- S FRASES EN EL TIEMPO for P.O./Estimate # FRASES EN EL TIEMPO  
PSA- S FRASES EN EL TIEMPO

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/25/2022	09:20 AM	:15	PSA	FRASES BUSTOS 5	0.00
10/26/2022	07:43 PM	:30	PSA	FRASES BUSTOS 6	0.00
10/27/2022	12:44 PM	:15	PSA	FRASES BUSTOS 1	0.00
10/28/2022	11:24 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/29/2022	09:45 AM	:15	PSA	FRASES BUSTOS 2	0.00
10/30/2022	04:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
10/31/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00

31 Total Items

Total Cost:

\$0.00

Amount Due:

\$0.00

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
5110 SE STARK STREET  
PORTLAND OR 97215  
503 234 5550/ 503 234 5583 FAX  
FAX 503 234 5583

Invoice ID: 22100340  
Invoice Date: 10/31/2022  
Account ID: 0054  
Order ID: 0054-383  
Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00  
Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
DISTELL RADIO GROUP  
5110 SE STARK STREET

Sponsor: PSA- S / PSA- S NLCRT LUNG CANCER for P.O./Estimate # NLCRT LUNG CANCER  
PSA- S NLCRT LUNG CANCER

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/5/2022	09:22 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
10/7/2022	09:22 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
10/12/2022	11:44 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00

3 Total Items Total Cost: \$0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Amount Due: **\$0.00**

STATE OF: OREGON  
COUNTY OF:  
Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
\_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22100342  
 Invoice Date: 10/31/2022  
 Account ID: 0054  
 Order ID: 0054-388  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- MIDDLE SCHOOL MENTAL HEALTH for P.O./Estimate # SUPPORT KIDS' MENTAL HEA  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/1/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
10/1/2022	11:40 PM	:15	Spot	CNMS0012000	0.00
10/2/2022	10:40 AM	:30	Spot	CNMS0011000	0.00
10/2/2022	08:40 PM	:15	Spot	CNMS0012000	0.00
10/3/2022	06:42 PM	:30	Spot	CNMS0011000	0.00
10/3/2022	11:42 PM	:15	Spot	CNMS0012000	0.00
10/4/2022	07:42 AM	:15	Spot	CNMS0012000	0.00
10/4/2022	12:20 PM	:30	Spot	CNMS0011000	0.00
10/5/2022	11:43 AM	:30	Spot	CNMS0011000	0.00
10/5/2022	09:22 PM	:15	Spot	CNMS0012000	0.00
10/6/2022	08:47 AM	:30	Spot	CNMS0011000	0.00
10/6/2022	09:23 PM	:15	Spot	CNMS0012000	0.00
10/7/2022	09:44 AM	:30	Spot	CNMS0011000	0.00
10/7/2022	02:44 PM	:15	Spot	CNMS0012000	0.00
10/8/2022	10:41 AM	:15	Spot	CNMS0012000	0.00
10/8/2022	08:43 PM	:30	Spot	CNMS0011000	0.00
10/9/2022	12:44 PM	:15	Spot	CNMS0012000	0.00
10/9/2022	07:40 PM	:30	Spot	CNMS0011000	0.00
10/10/2022	10:40 AM	:30	Spot	CNMS0011000	0.00
10/10/2022	09:20 PM	:15	Spot	CNMS0012000	0.00
10/11/2022	01:40 PM	:30	Spot	CNMS0011000	0.00
10/11/2022	10:40 PM	:15	Spot	CNMS0012000	0.00
10/12/2022	09:23 AM	:30	Spot	CNMS0011000	0.00
10/12/2022	04:42 PM	:15	Spot	CNMS0012000	0.00
10/13/2022	02:42 PM	:15	Spot	CNMS0012000	0.00
10/13/2022	06:44 PM	:30	Spot	CNMS0011000	0.00
10/14/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
10/14/2022	08:40 PM	:30	Spot	CNMS0011000	0.00
10/15/2022	10:40 AM	:30	Spot	CNMS0011000	0.00
10/15/2022	04:40 PM	:15	Spot	CNMS0012000	0.00
10/16/2022	12:40 PM	:15	Spot	CNMS0012000	0.00
10/16/2022	07:40 PM	:30	Spot	CNMS0011000	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBX 940 AM Invoice

Invoice ID: 22100342  
 Invoice Date: 10/31/2022

Sponsor: PSA- S / PSA- S- MIDDLE SCHOOL MENTAL HEALTH for P.O./Estimate # SUPPORT KIDS' MENTAL HEA  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/17/2022	02:43 PM	:30	Spot	CNMS0011000	0.00
10/17/2022	09:23 PM	:15	Spot	CNMS0012000	0.00
10/18/2022	07:43 AM	:15	Spot	CNMS0012000	0.00
10/18/2022	11:44 AM	:30	Spot	CNMS0011000	0.00
10/19/2022	10:43 AM	:15	Spot	CNMS0012000	0.00
10/19/2022	04:44 PM	:30	Spot	CNMS0011000	0.00
10/20/2022	07:23 AM	:30	Spot	CNMS0011000	0.00
10/20/2022	09:22 PM	:15	Spot	CNMS0012000	0.00
10/21/2022	10:43 AM	:30	Spot	CNMS0011000	0.00
10/21/2022	08:43 PM	:15	Spot	CNMS0012000	0.00
10/22/2022	02:44 PM	:30	Spot	CNMS0011000	0.00
10/22/2022	10:42 PM	:15	Spot	CNMS0012000	0.00
10/23/2022	01:42 PM	:15	Spot	CNMS0012000	0.00
10/23/2022	03:43 PM	:30	Spot	CNMS0011000	0.00
10/24/2022	06:43 AM	:15	Spot	CNMS0012000	0.00
10/24/2022	04:45 PM	:30	Spot	CNMS0011000	0.00
10/25/2022	10:40 AM	:15	Spot	CNMS0012000	0.00
10/25/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
10/26/2022	07:26 AM	:15	Spot	CNMS0012000	0.00
10/26/2022	06:43 PM	:30	Spot	CNMS0011000	0.00
10/27/2022	11:45 AM	:30	Spot	CNMS0011000	0.00
10/27/2022	04:42 PM	:15	Spot	CNMS0012000	0.00
10/28/2022	09:45 AM	:15	Spot	CNMS0012000	0.00
10/28/2022	01:46 PM	:30	Spot	CNMS0011000	0.00
10/29/2022	11:43 AM	:30	Spot	CNMS0011000	0.00
10/29/2022	11:41 PM	:15	Spot	CNMS0012000	0.00
10/30/2022	11:20 AM	:30	Spot	CNMS0011000	0.00
10/30/2022	05:42 PM	:15	Spot	CNMS0012000	0.00
10/31/2022	11:20 AM	:30	Spot	CNMS0011000	0.00
10/31/2022	09:20 PM	:15	Spot	CNMS0012000	0.00

62 Total Items

Total Cost:

\$0.00

**Amount Due:**

**\$0.00**

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
5110 SE STARK STREET  
PORTLAND OR 97215  
503 234 5550/ 503 234 5583 FAX  
FAX 503 234 5583

Invoice ID: 22100343  
Invoice Date: 10/31/2022  
Account ID: 0054  
Order ID: 0054-390  
Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
DISTELL RADIO GROUP  
5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- AMERICAN LUNG ASSOCIATION for P.O./Estimate # AMERICAN LUNG ASSOCIATION  
PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
10/31/2022	06:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
10/31/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
10/31/2022	06:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
10/31/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
<b>4 Total Items</b>				<b>Total Cost:</b>	<b>\$0.00</b>

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Amount Due: **\$0.00**

STATE OF: OREGON  
COUNTY OF:  
Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
\_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110416  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-375  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00  
 Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S PUBLIC AFFAIRS PROGRAM LA PANTERA for P.O./Estimate # PAP LA PANTERA  
 PSA- S PUBLIC AFFAIRS PROGRAM

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/6/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	PROGRAMA REHABILITACION ADICCI	0.00
11/13/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	TRATAMIENTO A LAS ADICCIONES	0.00
11/20/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	TRATAMIENTO A LAS ADICCIONES	0.00
11/27/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	VACUNAS MENORES	0.00

4 Total Items Total Cost: \$0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

**Amount Due: \$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC



# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110369  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-318  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/1/2022	06:20 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/1/2022	06:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/1/2022	10:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
11/2/2022	10:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
11/2/2022	04:20 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
11/2/2022	07:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
11/3/2022	08:20 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/3/2022	02:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
11/3/2022	06:20 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
11/4/2022	05:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/4/2022	06:20 PM	:30	PSA	DISTRACTED DRIVING	0.00
11/4/2022	09:20 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
11/5/2022	02:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/5/2022	07:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
11/5/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
11/6/2022	12:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/6/2022	01:20 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
11/6/2022	09:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/7/2022	06:20 AM	:30	PSA	DISTRACTED DRIVING	0.00
11/7/2022	03:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
11/7/2022	09:20 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
11/8/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/8/2022	07:20 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
11/8/2022	04:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
11/9/2022	12:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/9/2022	09:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/9/2022	12:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
11/10/2022	05:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
11/10/2022	08:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
11/10/2022	02:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
11/11/2022	04:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
11/11/2022	10:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
11/11/2022	05:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
11/12/2022	02:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/12/2022	01:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
11/12/2022	03:20 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF: \_\_\_\_\_  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBX 940 AM Invoice

Invoice ID: 22110369  
 Invoice Date: 11/30/2022

Sponsor: PSA- S  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/13/2022	05:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/13/2022	06:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
11/13/2022	02:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/14/2022	05:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/14/2022	06:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/14/2022	07:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/15/2022	12:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
11/15/2022	09:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
11/15/2022	10:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
11/16/2022	02:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/16/2022	03:20 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/16/2022	07:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/17/2022	02:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/17/2022	02:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/17/2022	06:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
11/18/2022	08:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
11/18/2022	01:20 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
11/18/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/19/2022	07:20 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/19/2022	03:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/19/2022	10:20 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/20/2022	06:20 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/20/2022	09:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
11/20/2022	07:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
11/21/2022	03:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/21/2022	01:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
11/21/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/22/2022	04:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/22/2022	03:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/22/2022	07:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/23/2022	03:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
11/23/2022	07:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
11/23/2022	10:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
11/24/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/24/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/24/2022	06:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/25/2022	01:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/25/2022	04:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/25/2022	11:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
11/26/2022	05:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
11/26/2022	11:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
11/26/2022	11:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/27/2022	07:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/27/2022	03:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/27/2022	04:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/28/2022	08:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/28/2022	11:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
11/28/2022	10:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
11/29/2022	03:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
11/29/2022	04:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00

Continued

# KWBY 940 AM Invoice

Invoice ID: 22110369  
Invoice Date: 11/30/2022

Sponsor: PSA- S  
PSA- S

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/29/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
11/30/2022	02:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
11/30/2022	05:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
11/30/2022	08:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00

90 Total Items

Total Cost:

\$0.00

Amount Due: \$0.00

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110370  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-374  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S FRASES EN EL TIEMPO for P.O./Estimate # FRASES EN EL TIEMPO  
 PSA- S FRASES EN EL TIEMPO

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/1/2022	01:20 PM	:15	PSA	FRASES BUSTOS 3	0.00
11/2/2022	11:20 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/3/2022	07:20 PM	:15	PSA	FRASES BUSTOS 4	0.00
11/4/2022	10:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/5/2022	09:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
11/6/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/7/2022	07:20 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/8/2022	02:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
11/9/2022	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/10/2022	03:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
11/11/2022	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/12/2022	01:20 PM	:15	PSA	FRASES BUSTOS 2	0.00
11/13/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/14/2022	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/15/2022	04:20 PM	:15	PSA	FRASES BUSTOS 4	0.00
11/16/2022	04:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/17/2022	01:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
11/18/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/19/2022	11:20 AM	:15	PSA	FRASES BUSTOS 1	0.00
11/20/2022	04:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/21/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/22/2022	01:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
11/23/2022	10:20 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/24/2022	12:20 AM	:15	PSA	FRASES BUSTOS 4	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

Invoice ID: 22110370  
Invoice Date: 11/30/2022

Sponsor: PSA- S / PSA- S FRASES EN EL TIEMPO for P.O./Estimate # FRASES EN EL TIEMPO  
PSA- S FRASES EN EL TIEMPO

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/25/2022	02:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/26/2022	03:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
11/27/2022	04:20 PM	:30	PSA	FRASES BUSTOS 6	0.00
11/28/2022	01:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
11/29/2022	11:40 AM	:15	PSA	FRASES BUSTOS 5	0.00
11/30/2022	03:20 PM	:30	PSA	FRASES BUSTOS 6	0.00

30 Total Items

Total Cost:

\$0.00

Amount Due:

**\$0.00**

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110372  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-377  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S LUNG CANCER for P.O./Estimate # SAVE YOUR LIFE  
 PSA- S LUNG CANCER

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/9/2022	02:20 PM	:30	PSA	CNLS0057000	0.00
11/11/2022	07:40 PM	:30	PSA	CNLS0057000	0.00
11/16/2022	03:40 AM	:30	PSA	CNLS0057000	0.00
11/18/2022	05:40 PM	:30	PSA	CNLS0057000	0.00
11/23/2022	02:40 AM	:30	PSA	CNLS0057000	0.00
11/25/2022	03:40 AM	:30	PSA	CNLS0057000	0.00
11/30/2022	05:40 AM	:30	PSA	CNLS0057000	0.00
<b>7 Total Items</b>				<b>Total Cost:</b>	<b>\$0.00</b>

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

**Amount Due:** **\$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110373  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-383  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S NLCRT LUNG CANCER for P.O./Estimate # NLCRT LUNG CANCER  
 PSA- S NLCRT LUNG CANCER

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/9/2022	01:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
11/11/2022	04:20 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
11/16/2022	07:20 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
11/18/2022	06:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
11/23/2022	01:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
11/25/2022	09:20 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
11/30/2022	12:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00

7 Total Items

Total Cost:

\$0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Amount Due:

**\$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110374  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-385  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S CHILD CAR SAFETY for P.O./Estimate # CHILD CAR SAFETY  
 PSA- S CHILD CAR SAFETY

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/9/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
11/10/2022	09:40 AM	:30	PSA	CNCS0044000	0.00
11/10/2022	11:20 PM	:60	PSA	CNCS0461000	0.00
11/11/2022	05:40 AM	:60	PSA	CNCS0461000	0.00
11/12/2022	02:20 AM	:30	PSA	CNCS0044000	0.00
11/12/2022	06:40 AM	:60	PSA	CNCS0461000	0.00
11/13/2022	08:40 PM	:60	PSA	CNCS0461000	0.00
11/14/2022	10:40 PM	:60	PSA	CNCS0461000	0.00
11/15/2022	08:20 AM	:60	PSA	CNCS0461000	0.00
11/15/2022	10:40 AM	:30	PSA	CNCS0044000	0.00
11/16/2022	03:20 AM	:60	PSA	CNCS0461000	0.00
11/17/2022	12:40 AM	:60	PSA	CNCS0461000	0.00
11/17/2022	09:40 AM	:30	PSA	CNCS0044000	0.00
11/18/2022	11:40 AM	:60	PSA	CNCS0461000	0.00
11/19/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
11/19/2022	08:40 AM	:30	PSA	CNCS0044000	0.00
11/20/2022	09:40 PM	:60	PSA	CNCS0461000	0.00
11/21/2022	03:20 AM	:60	PSA	CNCS0461000	0.00
11/22/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
11/22/2022	06:40 PM	:30	PSA	CNCS0044000	0.00
11/23/2022	08:20 AM	:60	PSA	CNCS0461000	0.00
11/24/2022	10:40 AM	:30	PSA	CNCS0044000	0.00
11/24/2022	05:20 PM	:60	PSA	CNCS0461000	0.00
11/25/2022	08:40 PM	:60	PSA	CNCS0461000	0.00
11/26/2022	09:20 AM	:60	PSA	CNCS0461000	0.00
11/26/2022	09:40 PM	:30	PSA	CNCS0044000	0.00
11/27/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
11/28/2022	03:20 AM	:60	PSA	CNCS0461000	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC



# KWBY 940 AM Invoice

Invoice ID: 22110374  
Invoice Date: 11/30/2022

Sponsor: PSA- S / PSA- S CHILD CAR SAFETY for P.O./Estimate # CHILD CAR SAFETY  
PSA- S CHILD CAR SAFETY

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/29/2022	05:40 PM	:30	PSA	CNCS0044000	0.00
11/29/2022	11:40 PM	:60	PSA	CNCS0461000	0.00
11/30/2022	06:40 AM	:60	PSA	CNCS0461000	0.00
<b>31 Total Items</b>				<b>Total Cost:</b>	<b>\$0.00</b>

Amount Due: \$0.00

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110375  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-388  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- MIDDLE SCHOOL MENTAL HEALTH for P.O./Estimate # SUPPORT KIDS' MENTAL HEA  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/1/2022	11:40 AM	:30	Spot	CNMS0011000	0.00
11/1/2022	07:40 PM	:15	Spot	CNMS0012000	0.00
11/2/2022	08:20 AM	:15	Spot	CNMS0012000	0.00
11/2/2022	07:20 PM	:30	Spot	CNMS0011000	0.00
11/3/2022	10:40 AM	:15	Spot	CNMS0012000	0.00
11/3/2022	05:20 PM	:30	Spot	CNMS0011000	0.00
11/4/2022	01:20 PM	:30	Spot	CNMS0011000	0.00
11/4/2022	08:40 PM	:15	Spot	CNMS0012000	0.00
11/5/2022	06:40 AM	:30	Spot	CNMS0011000	0.00
11/5/2022	10:40 PM	:15	Spot	CNMS0012000	0.00
11/6/2022	07:20 AM	:15	Spot	CNMS0012000	0.00
11/6/2022	09:40 PM	:30	Spot	CNMS0011000	0.00
11/7/2022	09:40 AM	:30	Spot	CNMS0011000	0.00
11/7/2022	05:40 PM	:15	Spot	CNMS0012000	0.00
11/8/2022	08:20 AM	:30	Spot	CNMS0011000	0.00
11/8/2022	08:40 PM	:15	Spot	CNMS0012000	0.00
11/9/2022	02:40 PM	:30	Spot	CNMS0011000	0.00
11/9/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
11/10/2022	06:40 PM	:15	Spot	CNMS0012000	0.00
11/10/2022	11:40 PM	:30	Spot	CNMS0011000	0.00
11/11/2022	12:40 PM	:15	Spot	CNMS0012000	0.00
11/11/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
11/12/2022	04:40 PM	:15	Spot	CNMS0012000	0.00
11/12/2022	10:40 PM	:30	Spot	CNMS0011000	0.00
11/13/2022	06:20 AM	:30	Spot	CNMS0011000	0.00
11/13/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
11/14/2022	09:40 AM	:30	Spot	CNMS0011000	0.00
11/14/2022	11:40 AM	:15	Spot	CNMS0012000	0.00
11/15/2022	08:40 AM	:30	Spot	CNMS0011000	0.00
11/15/2022	11:20 AM	:15	Spot	CNMS0012000	0.00
11/16/2022	07:20 AM	:15	Spot	CNMS0012000	0.00
11/16/2022	08:20 PM	:30	Spot	CNMS0011000	0.00

Continued

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

Invoice ID: 22110375  
 Invoice Date: 11/30/2022

Sponsor: PSA- S / PSA- S- MIDDLE SCHOOL MENTAL HEALTH for P.O./Estimate # SUPPORT KIDS' MENTAL HEA  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/17/2022	12:40 PM	:15	Spot	CNMS0012000	0.00
11/17/2022	04:40 PM	:30	Spot	CNMS0011000	0.00
11/18/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
11/18/2022	07:40 PM	:30	Spot	CNMS0011000	0.00
11/19/2022	09:40 AM	:15	Spot	CNMS0012000	0.00
11/19/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
11/20/2022	09:40 AM	:30	Spot	CNMS0011000	0.00
11/20/2022	05:40 PM	:15	Spot	CNMS0012000	0.00
11/21/2022	09:40 AM	:30	Spot	CNMS0011000	0.00
11/21/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
11/22/2022	09:20 AM	:30	Spot	CNMS0011000	0.00
11/22/2022	01:20 PM	:15	Spot	CNMS0012000	0.00
11/23/2022	07:20 AM	:30	Spot	CNMS0011000	0.00
11/23/2022	11:40 PM	:15	Spot	CNMS0012000	0.00
11/24/2022	11:40 AM	:30	Spot	CNMS0011000	0.00
11/24/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
11/25/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
11/25/2022	11:40 PM	:30	Spot	CNMS0011000	0.00
11/26/2022	06:40 AM	:30	Spot	CNMS0011000	0.00
11/26/2022	12:40 PM	:15	Spot	CNMS0012000	0.00
11/27/2022	07:40 AM	:30	Spot	CNMS0011000	0.00
11/27/2022	05:40 PM	:15	Spot	CNMS0012000	0.00
11/28/2022	08:20 AM	:15	Spot	CNMS0012000	0.00
11/28/2022	08:40 PM	:30	Spot	CNMS0011000	0.00
11/29/2022	02:40 PM	:15	Spot	CNMS0012000	0.00
11/29/2022	08:40 PM	:30	Spot	CNMS0011000	0.00
11/30/2022	10:40 AM	:15	Spot	CNMS0012000	0.00
11/30/2022	10:40 PM	:30	Spot	CNMS0011000	0.00

60 Total Items

Total Cost:

\$0.00

Amount Due:

**\$0.00**

# KWBX 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110376  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-390  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- AMERICAN LUNG ASSOCIATION for P.O./Estimate # AMERICAN LUNG ASSOCIATION  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/1/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/1/2022	02:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/1/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/1/2022	09:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/2/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/2/2022	12:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/2/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/2/2022	11:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/3/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/3/2022	12:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/3/2022	03:20 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/3/2022	07:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/4/2022	07:20 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/4/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/4/2022	04:20 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/4/2022	11:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/5/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/5/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/5/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/5/2022	09:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/6/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/6/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/6/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/6/2022	07:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/7/2022	08:20 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/7/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/7/2022	05:20 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/7/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/8/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/8/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/8/2022	06:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/8/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/9/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/9/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/9/2022	06:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/9/2022	09:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/10/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/10/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/10/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF: \_\_\_\_\_  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBV 940 AM Invoice

Invoice ID: 22110376  
 Invoice Date: 11/30/2022

Sponsor: PSA- S / PSA- S- AMERICAN LUNG ASSOCIATION for P.O./Estimate # AMERICAN LUNG ASSOCIATION  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/10/2022	09:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/11/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/11/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/11/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/11/2022	07:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/12/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/12/2022	02:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/12/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/12/2022	09:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/13/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/13/2022	02:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/13/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/13/2022	09:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/14/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/14/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/14/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/14/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/15/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/15/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/15/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/15/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/16/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/16/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/16/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/16/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/17/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/17/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/17/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/17/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/18/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/18/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/18/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/18/2022	09:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/19/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/19/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/19/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/19/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/20/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/20/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/20/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/20/2022	11:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/21/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/21/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/21/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/21/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/22/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/22/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/22/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/22/2022	07:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/23/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/23/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/23/2022	04:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/23/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00

Continued

# KWBX 940 AM Invoice

Invoice ID: 22110376  
 Invoice Date: 11/30/2022

Sponsor: PSA- S / PSA- S- AMERICAN LUNG ASSOCIATION for P.O./Estimate # AMERICAN LUNG ASSOCIATION  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/24/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/24/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/24/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/24/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/25/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/25/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/25/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/25/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/26/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/26/2022	10:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/26/2022	06:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/26/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/27/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/27/2022	10:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/27/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/27/2022	09:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/28/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/28/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/28/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/28/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/29/2022	09:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/29/2022	12:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/29/2022	03:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/29/2022	08:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/30/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/30/2022	01:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
11/30/2022	06:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
11/30/2022	09:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00

120 Total Items

Total Cost:

\$0.00

**Amount Due:** **\$0.00**

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22110377  
 Invoice Date: 11/30/2022  
 Account ID: 0054  
 Order ID: 0054-391  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- TYPE 2 DIABETES PREVENTION for P.O./Estimate # TYPE 2 DIABETES  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
11/10/2022	07:20 AM	:30	PSA	CNDT0319000	0.00
11/11/2022	01:40 PM	:60	PSA	CNDT0317000	0.00
11/12/2022	06:40 PM	:30	PSA	CNDT0319000	0.00
11/13/2022	09:40 PM	:60	PSA	CNDT0317000	0.00
11/14/2022	08:20 AM	:60	PSA	CNDT0317000	0.00
11/15/2022	11:40 AM	:30	PSA	CNDT0319000	0.00
11/16/2022	09:20 PM	:60	PSA	CNDT0317000	0.00
11/17/2022	07:20 AM	:30	PSA	CNDT0319000	0.00
11/18/2022	06:40 PM	:60	PSA	CNDT0317000	0.00
11/19/2022	02:40 PM	:30	PSA	CNDT0319000	0.00
11/20/2022	07:20 PM	:60	PSA	CNDT0317000	0.00
11/21/2022	12:20 PM	:60	PSA	CNDT0317000	0.00
11/22/2022	08:40 AM	:30	PSA	CNDT0319000	0.00
11/23/2022	12:40 PM	:60	PSA	CNDT0317000	0.00
11/24/2022	07:40 PM	:30	PSA	CNDT0319000	0.00
11/25/2022	07:40 PM	:60	PSA	CNDT0317000	0.00
11/26/2022	07:40 PM	:30	PSA	CNDT0319000	0.00
11/27/2022	02:40 PM	:60	PSA	CNDT0317000	0.00
11/28/2022	07:40 PM	:60	PSA	CNDT0317000	0.00
11/29/2022	07:40 AM	:30	PSA	CNDT0319000	0.00
11/30/2022	03:40 PM	:60	PSA	CNDT0317000	0.00
<b>21 Total Items</b>				<b>Total Cost:</b>	<b>\$0.00</b>

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

**Amount Due:** **\$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120306  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-375  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S PUBLIC AFFAIRS PROGRAM LA PANTERA for P.O./Estimate # LA PANTERA  
 PSA- S PUBLIC AFFAIRS PROGRAM

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/4/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	PSA- PUBLIC AFFAIRS	0.00
12/11/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	NUEVAS CAPAS COVID 19	0.00
12/18/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	TELEMEDINCINE COVID 19	0.00
12/25/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	TELEMEDINCINE COVID 19	0.00
<b>4 Total Items</b>				<b>Total Cost:</b>	<b>\$0.00</b>

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

**Amount Due:** **\$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC



# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120256  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-318  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/1/2022	05:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/1/2022	06:20 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/1/2022	10:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
12/2/2022	07:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/2/2022	05:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
12/2/2022	11:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
12/3/2022	05:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
12/3/2022	09:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/3/2022	08:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/4/2022	01:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
12/4/2022	03:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
12/4/2022	07:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
12/5/2022	03:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/5/2022	09:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
12/5/2022	03:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
12/6/2022	06:20 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/6/2022	06:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/6/2022	07:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/7/2022	08:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/7/2022	11:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/7/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/8/2022	04:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
12/8/2022	04:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
12/8/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
12/9/2022	12:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
12/9/2022	06:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
12/9/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
12/10/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/10/2022	05:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
12/10/2022	07:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/11/2022	01:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/11/2022	03:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/11/2022	08:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
12/12/2022	06:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
12/12/2022	11:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
12/12/2022	09:20 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWB 940 AM Invoice

Invoice ID: 22120256  
Invoice Date: 12/31/2022

Sponsor: PSA- S  
PSA- S

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/13/2022	10:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/13/2022	12:20 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/14/2022	01:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
12/14/2022	01:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/14/2022	03:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/15/2022	06:20 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/15/2022	07:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/15/2022	07:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
12/16/2022	04:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/16/2022	07:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/16/2022	07:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/17/2022	05:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/17/2022	07:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/17/2022	10:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
12/18/2022	01:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/18/2022	03:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/18/2022	08:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
12/19/2022	02:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/19/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/19/2022	07:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/20/2022	10:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/20/2022	05:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/20/2022	11:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
12/21/2022	12:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/21/2022	07:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/21/2022	06:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/22/2022	11:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
12/22/2022	04:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/22/2022	10:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/23/2022	04:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/23/2022	12:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/23/2022	06:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
12/24/2022	08:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/24/2022	10:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/24/2022	08:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
12/25/2022	12:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/25/2022	07:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/25/2022	11:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
12/26/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/26/2022	12:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/26/2022	10:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/27/2022	03:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
12/27/2022	09:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
12/27/2022	07:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/28/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/28/2022	07:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/28/2022	08:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
12/29/2022	04:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/29/2022	10:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/29/2022	05:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00

Continued

# KWBY 940 AM Invoice

Invoice ID: 22120256  
Invoice Date: 12/31/2022

Sponsor: PSA- S  
PSA- S

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/30/2022	10:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
12/30/2022	03:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
12/30/2022	05:20 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
12/31/2022	07:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
12/31/2022	12:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
12/31/2022	05:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00

92 Total Items

Total Cost:

\$0.00

Amount Due:

\$0.00

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120257  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-374  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S FRASES EN EL TIEMPO for P.O./Estimate # FRASES EN EL TIEMPO  
 PSA- S FRASES EN EL TIEMPO

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/1/2022	07:20 PM	:15	PSA	FRASES BUSTOS 1	0.00
12/2/2022	07:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/3/2022	05:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
12/4/2022	03:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/5/2022	07:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/6/2022	02:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
12/7/2022	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/8/2022	02:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
12/9/2022	10:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/10/2022	07:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
12/11/2022	02:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/12/2022	05:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/13/2022	04:40 PM	:15	PSA	FRASES BUSTOS 4	0.00
12/14/2022	02:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/15/2022	09:20 PM	:15	PSA	FRASES BUSTOS 5	0.00
12/16/2022	05:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/17/2022	11:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
12/18/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/19/2022	02:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/20/2022	01:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
12/21/2022	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/22/2022	02:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
12/23/2022	04:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/24/2022	08:40 PM	:15	PSA	FRASES BUSTOS 2	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

Invoice ID: 22120257  
Invoice Date: 12/31/2022

Sponsor: PSA- S / PSA- S FRASES EN EL TIEMPO for P.O./Estimate # FRASES EN EL TIEMPO  
PSA- S FRASES EN EL TIEMPO

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/25/2022	01:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/26/2022	11:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/27/2022	07:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
12/28/2022	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
12/29/2022	01:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
12/30/2022	06:20 PM	:30	PSA	FRASES BUSTOS 6	0.00
12/31/2022	05:40 PM	:15	PSA	FRASES BUSTOS 2	0.00

31 Total Items

Total Cost:

\$0.00

Amount Due:

\$0.00

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120259  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-377  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S LUNG CANCER for P.O./Estimate # SAVE YOUR LIFE  
 PSA- S LUNG CANCER

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/2/2022	05:40 AM	:30	PSA	CNLS0057000	0.00
12/7/2022	01:40 AM	:30	PSA	CNLS0057000	0.00
12/9/2022	06:40 PM	:30	PSA	CNLS0057000	0.00
12/14/2022	02:40 AM	:30	PSA	CNLS0057000	0.00
12/16/2022	01:40 PM	:30	PSA	CNLS0057000	0.00
12/21/2022	04:40 AM	:30	PSA	CNLS0057000	0.00
12/23/2022	06:40 AM	:30	PSA	CNLS0057000	0.00
12/28/2022	02:40 PM	:30	PSA	CNLS0057000	0.00
12/30/2022	04:20 PM	:30	PSA	CNLS0057000	0.00

9 Total Items

Total Cost:

\$0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Amount Due:

**\$0.00**

STATE OF: OREGON  
 COUNTY OF:

Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120260  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-383  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S NLCRT LUNG CANCER for P.O./Estimate # NLCRT LUNG CANCER  
 PSA- S NLCRT LUNG CANCER

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/2/2022	12:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/7/2022	03:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/9/2022	07:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/14/2022	01:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/16/2022	12:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/21/2022	11:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/23/2022	10:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/28/2022	06:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
12/30/2022	03:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
<b>9 Total Items</b>				<b>Total Cost:</b>	<b>\$0.00</b>

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

**Amount Due:** **\$0.00**

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120261  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-385  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S CHILD CAR SAFETY for P.O./Estimate # CHILD CAR SAFETY  
 PSA- S CHILD CAR SAFETY

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/1/2022	03:40 AM	:60	PSA	CNCS0461000	0.00
12/1/2022	12:20 PM	:30	PSA	CNCS0044000	0.00
12/2/2022	05:40 AM	:60	PSA	CNCS0461000	0.00
12/3/2022	08:40 AM	:60	PSA	CNCS0461000	0.00
12/3/2022	10:20 PM	:30	PSA	CNCS0044000	0.00
12/4/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
12/5/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
12/6/2022	01:40 AM	:60	PSA	CNCS0461000	0.00
12/6/2022	05:40 PM	:30	PSA	CNCS0044000	0.00
12/7/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
12/8/2022	12:40 PM	:30	PSA	CNCS0044000	0.00
12/8/2022	10:40 PM	:60	PSA	CNCS0461000	0.00
12/9/2022	05:40 PM	:60	PSA	CNCS0461000	0.00
12/10/2022	02:40 PM	:60	PSA	CNCS0461000	0.00
12/10/2022	04:40 PM	:30	PSA	CNCS0044000	0.00
12/11/2022	01:40 AM	:60	PSA	CNCS0461000	0.00
12/12/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
12/13/2022	02:20 PM	:30	PSA	CNCS0044000	0.00
12/13/2022	07:40 PM	:60	PSA	CNCS0461000	0.00
12/14/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
12/15/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
12/15/2022	03:40 PM	:30	PSA	CNCS0044000	0.00
12/16/2022	12:40 AM	:60	PSA	CNCS0461000	0.00
12/17/2022	06:40 PM	:30	PSA	CNCS0044000	0.00
12/17/2022	10:40 PM	:60	PSA	CNCS0461000	0.00
12/18/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
12/19/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
12/20/2022	03:40 PM	:30	PSA	CNCS0044000	0.00
12/20/2022	10:40 PM	:60	PSA	CNCS0461000	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC



# KWBY 940 AM Invoice

Invoice ID: 22120261  
Invoice Date: 12/31/2022

Sponsor: PSA- S / PSA- S CHILD CAR SAFETY for P.O./Estimate # CHILD CAR SAFETY  
PSA- S CHILD CAR SAFETY

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/21/2022	02:40 PM	:60	PSA	CNCS0461000	0.00
12/22/2022	02:40 PM	:60	PSA	CNCS0461000	0.00
12/22/2022	06:40 PM	:30	PSA	CNCS0044000	0.00
12/23/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
12/24/2022	01:40 PM	:60	PSA	CNCS0461000	0.00
12/24/2022	05:40 PM	:30	PSA	CNCS0044000	0.00
12/25/2022	11:40 PM	:60	PSA	CNCS0461000	0.00
12/26/2022	07:40 PM	:60	PSA	CNCS0461000	0.00
12/27/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
12/27/2022	12:40 PM	:30	PSA	CNCS0044000	0.00
12/28/2022	05:40 AM	:60	PSA	CNCS0461000	0.00
12/29/2022	08:40 AM	:30	PSA	CNCS0044000	0.00
12/29/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
12/30/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
12/31/2022	06:40 PM	:60	PSA	CNCS0461000	0.00
12/31/2022	09:40 PM	:30	PSA	CNCS0044000	0.00

45 Total Items

Total Cost:

\$0.00

Amount Due:

\$0.00

# KWBX 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120262  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-388  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- MIDDLE SCHOOL MENTAL HEALTH for P.O./Estimate # SUPPORT KIDS' MENTAL HEA  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/1/2022	09:40 AM	:15	Spot	CNMS0012000	0.00
12/1/2022	12:40 PM	:30	Spot	CNMS0011000	0.00
12/2/2022	07:20 AM	:30	Spot	CNMS0011000	0.00
12/2/2022	10:40 AM	:15	Spot	CNMS0012000	0.00
12/3/2022	07:20 AM	:15	Spot	CNMS0012000	0.00
12/3/2022	10:40 AM	:30	Spot	CNMS0011000	0.00
12/4/2022	02:40 PM	:15	Spot	CNMS0012000	0.00
12/4/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
12/5/2022	09:40 AM	:15	Spot	CNMS0012000	0.00
12/5/2022	11:40 AM	:30	Spot	CNMS0011000	0.00
12/6/2022	09:40 AM	:30	Spot	CNMS0011000	0.00
12/6/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
12/7/2022	04:40 PM	:15	Spot	CNMS0012000	0.00
12/7/2022	07:40 PM	:30	Spot	CNMS0011000	0.00
12/8/2022	11:40 AM	:30	Spot	CNMS0011000	0.00
12/8/2022	11:40 PM	:15	Spot	CNMS0012000	0.00
12/9/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
12/9/2022	07:40 PM	:30	Spot	CNMS0011000	0.00
12/10/2022	07:40 AM	:15	Spot	CNMS0012000	0.00
12/10/2022	07:40 PM	:30	Spot	CNMS0011000	0.00
12/11/2022	10:40 AM	:30	Spot	CNMS0011000	0.00
12/11/2022	11:40 PM	:15	Spot	CNMS0012000	0.00
12/12/2022	06:20 AM	:30	Spot	CNMS0011000	0.00
12/12/2022	05:40 PM	:15	Spot	CNMS0012000	0.00
12/13/2022	08:40 AM	:30	Spot	CNMS0011000	0.00
12/13/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
12/14/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
12/14/2022	07:40 PM	:30	Spot	CNMS0011000	0.00
12/15/2022	06:40 PM	:15	Spot	CNMS0012000	0.00
12/15/2022	09:20 PM	:30	Spot	CNMS0011000	0.00
12/16/2022	11:40 AM	:15	Spot	CNMS0012000	0.00
12/16/2022	05:40 PM	:30	Spot	CNMS0011000	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF: \_\_\_\_\_  
 Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

Invoice ID: 22120262  
 Invoice Date: 12/31/2022

Sponsor: PSA- S / PSA- S- MIDDLE SCHOOL MENTAL HEALTH for P.O./Estimate # SUPPORT KIDS' MENTAL HEA  
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/17/2022	08:40 AM	:15	Spot	CNMS0012000	0.00
12/17/2022	03:40 PM	:30	Spot	CNMS0011000	0.00
12/18/2022	02:40 PM	:30	Spot	CNMS0011000	0.00
12/18/2022	10:40 PM	:15	Spot	CNMS0012000	0.00
12/19/2022	05:40 PM	:15	Spot	CNMS0012000	0.00
12/19/2022	10:40 PM	:30	Spot	CNMS0011000	0.00
12/20/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
12/20/2022	10:40 PM	:30	Spot	CNMS0011000	0.00
12/21/2022	02:40 PM	:30	Spot	CNMS0011000	0.00
12/21/2022	06:40 PM	:15	Spot	CNMS0012000	0.00
12/22/2022	07:40 AM	:30	Spot	CNMS0011000	0.00
12/22/2022	01:40 PM	:15	Spot	CNMS0012000	0.00
12/23/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
12/23/2022	04:40 PM	:30	Spot	CNMS0011000	0.00
12/24/2022	12:40 PM	:15	Spot	CNMS0012000	0.00
12/24/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
12/25/2022	06:40 AM	:15	Spot	CNMS0012000	0.00
12/25/2022	01:40 PM	:30	Spot	CNMS0011000	0.00
12/26/2022	11:40 AM	:15	Spot	CNMS0012000	0.00
12/26/2022	04:40 PM	:30	Spot	CNMS0011000	0.00
12/27/2022	02:40 PM	:15	Spot	CNMS0012000	0.00
12/27/2022	05:40 PM	:30	Spot	CNMS0011000	0.00
12/28/2022	02:40 PM	:15	Spot	CNMS0012000	0.00
12/28/2022	11:40 PM	:30	Spot	CNMS0011000	0.00
12/29/2022	01:40 PM	:30	Spot	CNMS0011000	0.00
12/29/2022	06:40 PM	:15	Spot	CNMS0012000	0.00
12/30/2022	11:40 AM	:30	Spot	CNMS0011000	0.00
12/30/2022	04:40 PM	:15	Spot	CNMS0012000	0.00
12/31/2022	09:40 AM	:15	Spot	CNMS0012000	0.00
12/31/2022	02:40 PM	:30	Spot	CNMS0011000	0.00

62 Total Items

Total Cost:

\$0.00

Amount Due:

**\$0.00**

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120263  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-390  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00

Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- AMERICAN LUNG ASSOCIATION for P.O./Estimate # AMERICAN LUNG ASSOCIATION  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/1/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/1/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/1/2022	06:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/1/2022	07:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/2/2022	08:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/2/2022	02:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/2/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/2/2022	09:20 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/3/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/3/2022	02:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/3/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/3/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/4/2022	07:40 AM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/4/2022	11:40 AM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00
12/4/2022	05:40 PM	:30	PSA	LUN-NEXT-STEP-SPA	0.00
12/4/2022	10:40 PM	:30	PSA	LUN-SAVE-YOUR-LIFE-SPA	0.00

16 Total Items

Total Cost:

\$0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Amount Due:

**\$0.00**

STATE OF: OREGON  
 COUNTY OF:

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

DISTELL RADIO GROUP  
 5110 SE STARK STREET  
 PORTLAND OR 97215  
 503 234 5550/ 503 234 5583 FAX  
 FAX 503 234 5583

Invoice ID: 22120264  
 Invoice Date: 12/31/2022  
 Account ID: 0054  
 Order ID: 0054-391  
 Account Rep: HOUSE ACCOUNTS/ AMADC

Amount Due: \$0.00  
 Amount Paid: \_\_\_\_\_

PSA-S

PLEASE REMIT PAYMENT TO  
 DISTELL RADIO GROUP  
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S- TYPE 2 DIABETES PREVENTION for P.O./Estimate # TYPE 2 DIABETES  
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/1/2022	07:40 AM	:30	PSA	CNDT0319000	0.00
12/2/2022	10:40 AM	:60	PSA	CNDT0317000	0.00
12/3/2022	10:40 AM	:30	PSA	CNDT0319000	0.00
12/4/2022	02:20 PM	:60	PSA	CNDT0317000	0.00
12/5/2022	05:40 PM	:60	PSA	CNDT0317000	0.00
12/6/2022	06:40 AM	:30	PSA	CNDT0319000	0.00
12/7/2022	09:40 AM	:60	PSA	CNDT0317000	0.00
12/8/2022	05:40 PM	:30	PSA	CNDT0319000	0.00
12/9/2022	09:40 AM	:60	PSA	CNDT0317000	0.00
12/10/2022	05:40 PM	:30	PSA	CNDT0319000	0.00
12/11/2022	06:40 PM	:60	PSA	CNDT0317000	0.00
12/12/2022	11:40 PM	:60	PSA	CNDT0317000	0.00
12/13/2022	03:40 PM	:30	PSA	CNDT0319000	0.00
12/14/2022	06:40 AM	:60	PSA	CNDT0317000	0.00
12/15/2022	11:40 PM	:30	PSA	CNDT0319000	0.00
12/16/2022	11:40 PM	:60	PSA	CNDT0317000	0.00
12/17/2022	10:40 AM	:30	PSA	CNDT0319000	0.00
12/18/2022	06:40 AM	:60	PSA	CNDT0317000	0.00
12/19/2022	10:40 PM	:60	PSA	CNDT0317000	0.00
12/20/2022	02:40 PM	:30	PSA	CNDT0319000	0.00
12/21/2022	08:40 PM	:60	PSA	CNDT0317000	0.00
12/22/2022	03:40 PM	:30	PSA	CNDT0319000	0.00
12/23/2022	08:40 AM	:60	PSA	CNDT0317000	0.00
12/24/2022	09:40 AM	:30	PSA	CNDT0319000	0.00

AFFIDAVIT OF PERFORMANCE: I Certify that, in accordance with the Official Station Logs, announcements were broadcast as shown on this invoice \_\_\_\_\_

Continued

STATE OF: OREGON  
 COUNTY OF:  
 Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_, NOTARY PUBLIC

# KWBY 940 AM Invoice

Invoice ID: 22120264  
Invoice Date: 12/31/2022

Sponsor: PSA- S / PSA- S- TYPE 2 DIABETES PREVENTION for P.O./Estimate # TYPE 2 DIABETES  
PSA- S

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
12/25/2022	08:40 PM	:60	PSA	CNDT0317000	0.00
12/26/2022	11:40 PM	:60	PSA	CNDT0317000	0.00
12/27/2022	11:40 AM	:30	PSA	CNDT0319000	0.00
12/28/2022	09:40 AM	:60	PSA	CNDT0317000	0.00
12/29/2022	12:40 PM	:30	PSA	CNDT0319000	0.00
12/30/2022	06:40 PM	:60	PSA	CNDT0317000	0.00
12/31/2022	04:40 PM	:30	PSA	CNDT0319000	0.00

31 Total Items

Total Cost:

\$0.00

Amount Due:

**\$0.00**

## HP LaserJet M402dne

# Job Storage

### Job Storage Description

Job Storage allows you to send the print job to the printer and have it stored there until you print it from the printer's control panel. Some Job Storage jobs allow an optional PIN to be associated with the job for extra security.

### Job Storage USB Installation

To enable Job Storage, you must first insert a dedicated USB storage device (with at least 16GB of memory) in the rear USB slot. This USB storage device will hold the Job Storage jobs sent to the printer. If this USB storage device is removed, Job Storage will be disabled on the printer.

Insert the USB drive in the rear USB slot and follow the instructions on the control panel. This USB drive will be dedicated to Job Storage. The front USB slot will not work for Job Storage.

1. The USB cover may need to be removed to reveal the USB slot on some printer models. If there is a cover, remove it.
2. Insert a USB drive with at least 16GB of memory.
3. Follow the Control Panel messages to format the USB drive for Job Storage.

You may need to update your printer driver if you do not find the "Job Storage" tab after enabling the feature in the printer. Go to the following URL for instructions on how to update the printer driver.

<http://www.hp.com/support/jobstorage>