



Distell Radio Group

STATION ISSUES PUBLIC SERVICE & PUBLIC AFFAIRS

3RD QUARTER – JULY 2021

KWBY – 940 AM

The following public service announcements on the attached sheet were aired during the period JULY 1st to JULY 31ST 2021 on the station indicated. All Public Service and Public Affairs programs were aired on the stations listed above.

A handwritten signature in blue ink that reads 'Chitralekha Gade'.

Chitralekha Gade
Director of Administration

KWBY 940AM Invoice

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

Invoice ID: 21070346
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-377
 Account Rep: HOUSE ACCOUNTS/ AMA

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
7/2/2021	04:40 PM	:30	Spot	CNLS0057000	0.00
7/7/2021	07:40 AM	:30	Spot	CNLS0057000	0.00
7/9/2021	11:40 AM	:30	Spot	CNLS0057000	0.00
7/14/2021	06:40 AM	:30	Spot	CNLS0057000	0.00
7/16/2021	10:40 AM	:30	Spot	CNLS0057000	0.00
7/21/2021	09:40 AM	:30	Spot	CNLS0057000	0.00
7/23/2021	06:40 PM	:30	Spot	CNLS0057000	0.00
7/28/2021	12:40 PM	:30	Spot	CNLS0057000	0.00
7/30/2021	05:40 PM	:30	Spot	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

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940AM Invoice

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

Invoice ID: 21070345
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-376
 Account Rep: HOUSE ACCOUNTS/ AMA

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S HUD/NATIONAL for P.O./Estimate # HUD/NATIONAL FAIR HOUSING ALLIANCE
 PSA- S HUD/NATIONAL FAIR HOUSING ALLIANCE

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2021	12:40 PM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/3/2021	05:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00
7/6/2021	03:40 PM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/8/2021	06:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00
7/10/2021	03:40 PM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/13/2021	03:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00
7/15/2021	12:40 PM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/17/2021	12:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00
7/20/2021	06:40 PM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/22/2021	06:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00
7/24/2021	11:40 AM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/27/2021	03:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00
7/29/2021	01:40 PM	:30	PSA	65024B CERRADO/EXCLUIDO	0.00
7/31/2021	05:40 PM	:30	PSA	65024F NEGACION ENMASCARADA	0.00

14 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

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940AM Invoice

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

Invoice ID: 21070344
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-375
 Account Rep: HOUSE ACCOUNTS/ AMA

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

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/4/2021	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	ASEGURANZAS KATIA 1 03102021	0.00
7/11/2021	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	ALCANCE LATINO	0.00
7/18/2021	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	KATIA EVENTO SABADOS	0.00
7/25/2021	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	KATIA EVENTO SABADOS	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**

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

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

KWBY 940AM Invoice

Invoice ID: 21070343
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-374
 Account Rep: HOUSE ACCOUNTS/ AMA

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

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2021	08:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
7/2/2021	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/3/2021	11:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
7/4/2021	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/5/2021	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/6/2021	10:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
7/7/2021	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/8/2021	08:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
7/9/2021	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/10/2021	06:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
7/11/2021	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/12/2021	02:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/13/2021	05:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
7/14/2021	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/15/2021	06:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
7/16/2021	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/17/2021	02:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
7/18/2021	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/19/2021	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/20/2021	10:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
7/21/2021	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/22/2021	06:40 AM	:15	PSA	FRASES BUSTOS 5	0.00
7/23/2021	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/24/2021	06:40 PM	:15	PSA	FRASES BUSTOS 1	0.00

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

Continued

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940AM Invoice

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

Invoice ID: 21070343
Invoice Date: 7/31/2021

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/25/2021	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/26/2021	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/27/2021	08:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
7/28/2021	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/29/2021	04:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
7/30/2021	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/31/2021	03:40 PM	:15	PSA	FRASES BUSTOS 4	0.00

31 Total Items

Total Cost:

0.00

Amount Due:

0.00

KWBY 940AM Invoice

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

Invoice ID: 21070342
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-373
 Account Rep: HOUSE ACCOUNTS/ AMA

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S COVID-19 VACC for P.O./Estimate # COVID-19 VACCINE EDUCATION
 PSA- S COVID-19 VACCINE EDUCATION

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2021	09:40 AM	:30	PSA	CNVE0809000	0.00
7/1/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/1/2021	03:40 PM	:30	PSA	CNVE0809000	0.00
7/1/2021	04:40 PM	:60	PSA	CNVE0811000	0.00
7/1/2021	05:40 PM	:15	PSA	CNVE0168000	0.00
7/2/2021	06:40 AM	:60	PSA	CNVE0811000	0.00
7/2/2021	10:40 AM	:15	PSA	CNVE0168000	0.00
7/2/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/2/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/2/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/3/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/3/2021	01:40 PM	:60	PSA	CNVE0811000	0.00
7/3/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/3/2021	05:40 PM	:30	PSA	CNVE0809000	0.00
7/3/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/4/2021	09:40 AM	:30	PSA	CNVE0809000	0.00
7/4/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/4/2021	04:40 PM	:60	PSA	CNVE0811000	0.00
7/4/2021	05:40 PM	:15	PSA	CNVE0168000	0.00
7/4/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/5/2021	09:40 AM	:60	PSA	CNVE0811000	0.00
7/5/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/5/2021	01:40 PM	:30	PSA	CNVE0809000	0.00
7/5/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/5/2021	04:40 PM	:30	PSA	CNVE0809000	0.00
7/6/2021	07:40 AM	:60	PSA	CNVE0811000	0.00
7/6/2021	10:40 AM	:30	PSA	CNVE0809000	0.00
7/6/2021	11:40 AM	:15	PSA	CNVE0168000	0.00
7/6/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/6/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/7/2021	08:40 AM	:15	PSA	CNVE0168000	0.00
7/7/2021	09:40 AM	:30	PSA	CNVE0809000	0.00
7/7/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/7/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/7/2021	05:40 PM	:60	PSA	CNVE0811000	0.00
7/8/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/8/2021	10:40 AM	:30	PSA	CNVE0809000	0.00
7/8/2021	02:40 PM	:60	PSA	CNVE0811000	0.00
7/8/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/8/2021	04:40 PM	:30	PSA	CNVE0809000	0.00

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

Continued

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWB 940AM Invoice

Sponsor: PSA- S / PSA- S COVID-19 VACC for P.O./Estimate # COVID-19 VACCINE EDUCATION
 PSA- S COVID-19 VACCINE EDUCATION

Invoice ID: 21070342
 Invoice Date: 7/31/2021

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/9/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/9/2021	07:40 AM	:60	PSA	CNVE0811000	0.00
7/9/2021	01:40 PM	:30	PSA	CNVE0809000	0.00
7/9/2021	03:40 PM	:30	PSA	CNVE0809000	0.00
7/9/2021	06:40 PM	:15	PSA	CNVE0168000	0.00
7/10/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/10/2021	01:40 PM	:15	PSA	CNVE0168000	0.00
7/10/2021	04:40 PM	:60	PSA	CNVE0811000	0.00
7/10/2021	05:40 PM	:30	PSA	CNVE0809000	0.00
7/10/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/11/2021	10:40 AM	:60	PSA	CNVE0811000	0.00
7/11/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/11/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/11/2021	04:40 PM	:30	PSA	CNVE0809000	0.00
7/11/2021	05:40 PM	:30	PSA	CNVE0809000	0.00
7/12/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/12/2021	07:40 AM	:15	PSA	CNVE0168000	0.00
7/12/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/12/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/12/2021	04:40 PM	:60	PSA	CNVE0811000	0.00
7/13/2021	09:40 AM	:30	PSA	CNVE0809000	0.00
7/13/2021	11:40 AM	:15	PSA	CNVE0168000	0.00
7/13/2021	12:40 PM	:60	PSA	CNVE0811000	0.00
7/13/2021	03:40 PM	:30	PSA	CNVE0809000	0.00
7/13/2021	04:40 PM	:30	PSA	CNVE0809000	0.00
7/14/2021	07:40 AM	:30	PSA	CNVE0809000	0.00
7/14/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/14/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/14/2021	03:40 PM	:60	PSA	CNVE0811000	0.00
7/14/2021	06:40 PM	:15	PSA	CNVE0168000	0.00
7/15/2021	10:40 AM	:30	PSA	CNVE0809000	0.00
7/15/2021	01:40 PM	:30	PSA	CNVE0809000	0.00
7/15/2021	04:40 PM	:15	PSA	CNVE0168000	0.00
7/15/2021	05:40 PM	:60	PSA	CNVE0811000	0.00
7/15/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/16/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/16/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/16/2021	10:40 AM	:30	PSA	CNVE0809000	0.00
7/16/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/16/2021	04:40 PM	:60	PSA	CNVE0811000	0.00
7/17/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/17/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/17/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/17/2021	04:40 PM	:15	PSA	CNVE0168000	0.00
7/17/2021	06:40 PM	:60	PSA	CNVE0811000	0.00
7/18/2021	07:40 AM	:30	PSA	CNVE0809000	0.00
7/18/2021	09:40 AM	:30	PSA	CNVE0809000	0.00
7/18/2021	11:40 AM	:15	PSA	CNVE0168000	0.00
7/18/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/18/2021	05:40 PM	:60	PSA	CNVE0811000	0.00
7/19/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/19/2021	08:40 AM	:60	PSA	CNVE0811000	0.00
7/19/2021	10:40 AM	:30	PSA	CNVE0809000	0.00
7/19/2021	01:40 PM	:30	PSA	CNVE0809000	0.00
7/19/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/20/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/20/2021	07:40 AM	:15	PSA	CNVE0168000	0.00
7/20/2021	12:40 PM	:30	PSA	CNVE0809000	0.00

Continued

KWBY 940AM Invoice

Sponsor: PSA- S / PSA- S COVID-19 VACC for P.O./Estimate # COVID-19 VACCINE EDUCATION
 PSA- S COVID-19 VACCINE EDUCATION

Invoice ID: 21070342
 Invoice Date: 7/31/2021

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/20/2021	04:40 PM	:60	PSA	CNVE0811000	0.00
7/20/2021	05:40 PM	:30	PSA	CNVE0809000	0.00
7/21/2021	07:40 AM	:30	PSA	CNVE0809000	0.00
7/21/2021	10:40 AM	:60	PSA	CNVE0811000	0.00
7/21/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/21/2021	01:40 PM	:15	PSA	CNVE0168000	0.00
7/21/2021	04:40 PM	:30	PSA	CNVE0809000	0.00
7/22/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/22/2021	09:40 AM	:60	PSA	CNVE0811000	0.00
7/22/2021	10:40 AM	:15	PSA	CNVE0168000	0.00
7/22/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/22/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/23/2021	07:40 AM	:30	PSA	CNVE0809000	0.00
7/23/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/23/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/23/2021	12:40 PM	:15	PSA	CNVE0168000	0.00
7/23/2021	03:40 PM	:60	PSA	CNVE0811000	0.00
7/24/2021	07:40 AM	:60	PSA	CNVE0811000	0.00
7/24/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/24/2021	01:40 PM	:15	PSA	CNVE0168000	0.00
7/24/2021	05:40 PM	:30	PSA	CNVE0809000	0.00
7/24/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/25/2021	06:40 AM	:15	PSA	CNVE0168000	0.00
7/25/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/25/2021	03:40 PM	:60	PSA	CNVE0811000	0.00
7/25/2021	04:40 PM	:30	PSA	CNVE0809000	0.00
7/25/2021	06:40 PM	:30	PSA	CNVE0809000	0.00
7/26/2021	09:40 AM	:60	PSA	CNVE0811000	0.00
7/26/2021	10:40 AM	:30	PSA	CNVE0809000	0.00
7/26/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/26/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/26/2021	05:40 PM	:15	PSA	CNVE0168000	0.00
7/27/2021	08:40 AM	:60	PSA	CNVE0811000	0.00
7/27/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/27/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/27/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/27/2021	05:40 PM	:30	PSA	CNVE0809000	0.00
7/28/2021	07:40 AM	:30	PSA	CNVE0809000	0.00
7/28/2021	08:40 AM	:60	PSA	CNVE0811000	0.00
7/28/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/28/2021	04:40 PM	:30	PSA	CNVE0809000	0.00
7/28/2021	05:40 PM	:15	PSA	CNVE0168000	0.00
7/29/2021	07:40 AM	:60	PSA	CNVE0811000	0.00
7/29/2021	11:40 AM	:30	PSA	CNVE0809000	0.00
7/29/2021	12:40 PM	:30	PSA	CNVE0809000	0.00
7/29/2021	01:40 PM	:30	PSA	CNVE0809000	0.00
7/29/2021	06:40 PM	:15	PSA	CNVE0168000	0.00
7/30/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/30/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/30/2021	09:40 AM	:30	PSA	CNVE0809000	0.00
7/30/2021	03:40 PM	:60	PSA	CNVE0811000	0.00
7/30/2021	06:40 PM	:15	PSA	CNVE0168000	0.00
7/31/2021	06:40 AM	:30	PSA	CNVE0809000	0.00
7/31/2021	08:40 AM	:30	PSA	CNVE0809000	0.00
7/31/2021	02:40 PM	:30	PSA	CNVE0809000	0.00
7/31/2021	03:40 PM	:15	PSA	CNVE0168000	0.00
7/31/2021	04:40 PM	:60	PSA	CNVE0811000	0.00

155 Total Items

Total Cost: 0.00

Amount Due: 0.00

KWBY 940AM Invoice

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

Invoice ID: 21070341
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-372
 Account Rep: HOUSE ACCOUNTS/ AMA

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S DISCOVERING N for P.O./Estimate # DISCOVER THE FOREST
 PSA- S DISCOVERING NATURE

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2021	11:40 AM	:30	PSA	CNFT0480000	0.00
7/3/2021	11:40 AM	:30	PSA	CNFT0480000	0.00
7/6/2021	07:40 AM	:30	PSA	CNFT0480000	0.00
7/8/2021	11:40 AM	:30	PSA	CNFT0480000	0.00
7/10/2021	02:40 PM	:30	PSA	CNFT0480000	0.00
7/13/2021	06:40 AM	:30	PSA	CNFT0480000	0.00
7/15/2021	02:40 PM	:30	PSA	CNFT0480000	0.00
7/17/2021	08:40 AM	:30	PSA	CNFT0480000	0.00
7/20/2021	12:40 PM	:30	PSA	CNFT0480000	0.00
7/22/2021	09:40 AM	:30	PSA	CNFT0480000	0.00
7/24/2021	05:40 PM	:30	PSA	CNFT0480000	0.00
7/27/2021	12:40 PM	:30	PSA	CNFT0480000	0.00
7/29/2021	10:40 AM	:30	PSA	CNFT0480000	0.00
7/31/2021	04:40 PM	:30	PSA	CNFT0480000	0.00

14 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

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

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

KWBX 940AM Invoice

Invoice ID: 21070340
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-368
 Account Rep: HOUSE ACCOUNTS/ AMA

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S DEPARTMENT OF for P.O./Estimate # SAFE AT HOME COMBINED/HOMELESSNESS
 PSA- S DEPARTMENT OF VETERANS AFFAIRS

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2021	05:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/3/2021	01:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/6/2021	08:40 AM	:30	PSA	VAHOME30SPRA	0.00
7/8/2021	03:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/10/2021	03:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/13/2021	05:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/15/2021	09:40 AM	:30	PSA	VAHOME30SPRA	0.00
7/17/2021	10:40 AM	:30	PSA	VAHOME30SPRA	0.00
7/20/2021	09:40 AM	:30	PSA	VAHOME30SPRA	0.00
7/22/2021	03:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/24/2021	01:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/27/2021	04:40 PM	:30	PSA	VAHOME30SPRA	0.00
7/29/2021	08:40 AM	:30	PSA	VAHOME30SPRA	0.00
7/31/2021	08:40 AM	:30	PSA	VAHOME30SPRA	0.00

14 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

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

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

KWBX 940AM Invoice

Invoice ID: 21070339
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-366
 Account Rep: HOUSE ACCOUNTS/ AMA

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S EDAD Y SABIDU for P.O./Estimate # EDAD Y SABIDURIA
 PSA- S EDAD Y SABIDURIA ODOT SAFE DRIVING PSA

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/5/2021	05:40 PM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/7/2021	08:40 AM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/12/2021	08:40 AM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/14/2021	06:40 AM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/19/2021	12:40 PM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/21/2021	09:40 AM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/26/2021	01:40 PM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00
7/28/2021	10:40 AM	:30	PSA	AGING ROAD USERS_EDAD Y SABIDU	0.00

8 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

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940AM Invoice

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

Invoice ID: 21070338
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-361
 Account Rep: HOUSE ACCOUNTS/ AMA

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 HEAR for P.O./Estimate # DON'T DIE OF DOUBT
 PSA- S AMERICAN HEART ASSOCIATION

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/2/2021	06:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/4/2021	01:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/7/2021	11:40 AM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/9/2021	09:40 AM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/11/2021	02:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/14/2021	06:40 AM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/16/2021	06:40 AM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/18/2021	02:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/21/2021	12:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/23/2021	04:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/25/2021	12:40 PM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/28/2021	10:40 AM	:30	PSA	DON'T DIE OF DOUBT	0.00
7/30/2021	09:40 AM	:30	PSA	DON'T DIE OF DOUBT	0.00

13 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

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940AM Invoice

Sponsor: PSA- S / PSA- S ENDING HUNGER for P.O./Estimate # ENDING HUNGER
PSA- S

Invoice ID: 21070337
Invoice Date: 7/31/2021

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/25/2021	10:40 AM	:60	PSA	CNFA1108000	0.00
7/26/2021	03:40 PM	:60	PSA	CNFA1108000	0.00
7/27/2021	03:40 PM	:30	PSA	CNFA1107000	0.00
7/28/2021	04:40 PM	:60	PSA	CNFA1108000	0.00
7/29/2021	05:40 PM	:30	PSA	CNFA1107000	0.00
7/30/2021	04:40 PM	:60	PSA	CNFA1108000	0.00
7/31/2021	12:40 PM	:30	PSA	CNFA1107000	0.00

31 Total Items

Total Cost:

0.00

Amount Due:

0.00

KWBY 940AM Invoice

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

Invoice ID: 21070336
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-346
 Account Rep: PSA COVID

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S / PSA- S BUSTOS MEDIA for P.O./Estimate # BUSTOS MEDIA CORONAVIRUS
 PSA- S BUSTOS MEDIA CORONAVIRUS

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2021	06:40 AM	:60	PSA	PSA VIRUS 03-13-20	0.00
7/2/2021	07:40 AM	:60	PSA	PSA VIRUS 03-13-20	0.00
7/3/2021	11:40 AM	:60	PSA	PSA VIRUS 03-13-20	0.00
7/4/2021	02:40 PM	:60	PSA	PSA VIRUS 03-13-20	0.00
7/5/2021	10:40 AM	:60	PSA	PSA VIRUS 03-13-20	0.00
7/6/2021	08:40 AM	:60	PSA	PSA VIRUS 03-13-20	0.00
6 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**

Subscribed and sworn before me this ____ day of _____

_____, NOTARY PUBLIC

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

KWBY 940AM Invoice

Invoice ID: 21070335
 Invoice Date: 7/31/2021
 Account ID: 0054
 Order ID: 0054-318
 Account Rep: HOUSE ACCOUNTS/ AMA

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
7/1/2021	07:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/1/2021	09:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/1/2021	12:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 RADIO	0.00
7/2/2021	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/2/2021	10:40 AM	:30	PSA	CNFF0635000	0.00
7/2/2021	04:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/3/2021	10:40 AM	:30	PSA	VYSJ0475000H	0.00
7/3/2021	03:40 PM	:30	PSA	LAFUERFA2130	0.00
7/3/2021	05:40 PM	:30	PSA	SARM0240000	0.00
7/4/2021	11:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/4/2021	01:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/4/2021	04:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 RADIO	0.00
7/5/2021	06:40 AM	:30	PSA	BCU_PSA_30_SP	0.00
7/5/2021	09:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/5/2021	12:40 PM	:30	PSA	CNFF0635000	0.00
7/6/2021	06:40 AM	:30	PSA	VYSJ0475000H	0.00
7/6/2021	10:40 AM	:30	PSA	SARM0240000	0.00
7/6/2021	02:40 PM	:30	PSA	LAFUERFA2130	0.00
7/7/2021	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/7/2021	03:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 RADIO	0.00
7/7/2021	06:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/8/2021	08:40 AM	:30	PSA	BCU_PSA_30_SP	0.00
7/8/2021	10:40 AM	:30	PSA	CNFF0635000	0.00
7/8/2021	12:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
7/9/2021	07:40 AM	:30	PSA	LAFUERFA2130	0.00
7/9/2021	11:40 AM	:30	PSA	SARM0240000	0.00
7/9/2021	12:40 PM	:30	PSA	VYSJ0475000H	0.00
7/10/2021	09:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/10/2021	05:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/10/2021	06:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 RADIO	0.00
7/11/2021	03:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
7/11/2021	03:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/11/2021	05:40 PM	:30	PSA	CNFF0635000	0.00
7/12/2021	08:40 AM	:30	PSA	VYSJ0475000H	0.00
7/12/2021	05:40 PM	:30	PSA	LAFUERFA2130	0.00
7/12/2021	06:40 PM	:30	PSA	SARM0240000	0.00

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

Continued

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940AM Invoice

Sponsor: PSA- S
PSA- S

Invoice ID: 21070335
Invoice Date: 7/31/2021

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/13/2021	06:40 AM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/13/2021	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/13/2021	02:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/14/2021	10:40 AM	:30	PSA	CNFF0635000	0.00
7/14/2021	11:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/14/2021	06:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/15/2021	09:40 AM	:30	PSA	SARM0240000	0.00
7/15/2021	10:40 AM	:30	PSA	VYSJ0475000H	0.00
7/15/2021	04:40 PM	:30	PSA	LAFUERFA2130	0.00
7/16/2021	08:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/16/2021	12:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/16/2021	01:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/17/2021	06:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/17/2021	06:40 AM	:30	PSA	CNFF0635000	0.00
7/17/2021	04:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/18/2021	02:40 PM	:30	PSA	SARM0240000	0.00
7/18/2021	04:40 PM	:30	PSA	VYSJ0475000H	0.00
7/18/2021	05:40 PM	:30	PSA	LAFUERFA2130	0.00
7/19/2021	07:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/19/2021	10:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/19/2021	01:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/20/2021	08:40 AM	:30	PSA	CNFF0635000	0.00
7/20/2021	11:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/20/2021	03:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/21/2021	01:40 PM	:30	PSA	VYSJ0475000H	0.00
7/21/2021	03:40 PM	:30	PSA	SARM0240000	0.00
7/21/2021	06:40 PM	:30	PSA	LAFUERFA2130	0.00
7/22/2021	05:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/22/2021	05:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/22/2021	06:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/23/2021	06:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/23/2021	04:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/23/2021	05:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/24/2021	12:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
7/24/2021	02:40 PM	:30	PSA	VYSJ0475000H	0.00
7/24/2021	04:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/25/2021	08:40 AM	:30	PSA	LAFUERFA2130	0.00
7/25/2021	12:40 PM	:30	PSA	CNFF0635000	0.00
7/25/2021	01:40 PM	:30	PSA	SARM0240000	0.00
7/26/2021	07:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/26/2021	11:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/26/2021	01:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/27/2021	06:40 AM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/27/2021	10:40 AM	:30	PSA	CNFF0635000	0.00
7/27/2021	01:40 PM	:30	PSA	BCU_PSA_30_SP	0.00
7/28/2021	09:40 AM	:30	PSA	VYSJ0475000H	0.00
7/28/2021	09:40 AM	:30	PSA	SARM0240000	0.00
7/28/2021	03:40 PM	:30	PSA	LAFUERFA2130	0.00
7/29/2021	09:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
7/29/2021	02:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
7/29/2021	06:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/30/2021	08:40 AM	:30	PSA	BCU_PSA_30_SP	0.00

Continued

KWBY 940AM Invoice

Sponsor: PSA- S
PSA- S

Invoice ID: 21070335
Invoice Date: 7/31/2021

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/30/2021	11:40 AM	:30	PSA	VYSJ0475000H	0.00
7/30/2021	05:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
7/31/2021	10:40 AM	:30	PSA	CNFF0635000	0.00
7/31/2021	12:40 PM	:30	PSA	SARM0240000	0.00
7/31/2021	05:40 PM	:30	PSA	TSD-ODOT_SIN ACCIDENTE 30 R	0.00
93 Total Items				Total Cost:	0.00

Amount Due: 0.00