

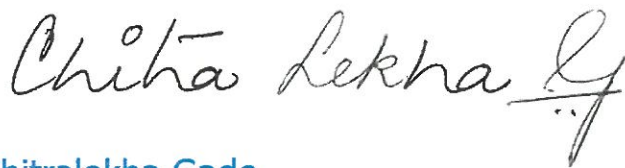
DISTELL RADIO GROUP

STATION ISSUES PUBLIC SERVICE & PUBLIC AFFAIRS

QUARTER 3, 2022

KWBY 940AM

The following public service announcements on the attached sheet were during the period July 1st 2022 to September 30th 2022 on the station Indicated. All Public service and Programs were aired on the stations listed above.



Chitralekha Gade

CAO (Chief Administrative Office)

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: 22070365
 Invoice Date: 7/31/2022
 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
7/1/2022	08:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
7/1/2022	11:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
7/1/2022	07:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
7/2/2022	05:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/2/2022	07:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/2/2022	11:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
7/3/2022	01:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/3/2022	05:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
7/3/2022	10:20 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
7/4/2022	04:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
7/4/2022	02:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
7/4/2022	04:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/5/2022	02:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/5/2022	09:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
7/5/2022	09:20 PM	:30	PSA	DISTRACTED DRIVING	0.00
7/6/2022	03:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
7/6/2022	01:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
7/6/2022	08:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
7/7/2022	12:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
7/7/2022	12:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/7/2022	06:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/8/2022	05:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
7/8/2022	08:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/8/2022	07:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
7/9/2022	01:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
7/9/2022	07:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
7/9/2022	11:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
7/10/2022	10:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
7/10/2022	05:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
7/10/2022	11:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
7/11/2022	04:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
7/11/2022	06:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
7/11/2022	10:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
7/12/2022	03:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
7/12/2022	09:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
7/12/2022	04:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	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: 22070365
 Invoice Date: 7/31/2022

Sponsor: PSA- S
 PSA- S

Page 2

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

Continued

KWBY 940 AM Invoice

Invoice ID: 22070365
Invoice Date: 7/31/2022

Sponsor: PSA- S
PSA- S

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/29/2022	11:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
7/30/2022	02:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
7/30/2022	11:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
7/30/2022	07:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
7/31/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
7/31/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
7/31/2022	08:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	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: 22070366
 Invoice Date: 7/31/2022
 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
7/1/2022	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/2/2022	02:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
7/3/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/4/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/5/2022	01:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
7/6/2022	10:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/7/2022	11:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
7/8/2022	06:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/9/2022	12:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
7/10/2022	09:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/11/2022	04:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/12/2022	08:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
7/13/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/14/2022	03:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
7/15/2022	12:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/16/2022	11:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
7/17/2022	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/18/2022	04:20 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/19/2022	09:20 PM	:15	PSA	FRASES BUSTOS 5	0.00
7/20/2022	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/21/2022	02:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
7/22/2022	02:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/23/2022	07:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
7/24/2022	10:40 PM	: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: 22070366
Invoice Date: 7/31/2022

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
7/25/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
7/26/2022	11:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
7/27/2022	07:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/28/2022	06:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
7/29/2022	06:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
7/30/2022	09:40 AM	:15	PSA	FRASES BUSTOS 5	0.00
7/31/2022	03:40 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: 22070367
 Invoice Date: 7/31/2022
 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
7/3/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
7/10/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
7/17/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
7/24/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
7/31/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	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: 22070368
 Invoice Date: 7/31/2022
 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
7/1/2022	04:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/6/2022	09:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/8/2022	04:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/13/2022	08:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/15/2022	07:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/20/2022	12:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/22/2022	02:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/27/2022	11:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/29/2022	01:20 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	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: 22070368
 Invoice Date: 7/31/2022
 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
7/1/2022	04:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/6/2022	09:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/8/2022	04:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/13/2022	08:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/15/2022	07:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/20/2022	12:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/22/2022	02:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/27/2022	11:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
7/29/2022	01:20 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	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: 22070369
 Invoice Date: 7/31/2022
 Account ID: 0054
 Order ID: 0054-384
 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 GOT YOUR SIX - BOB WOODRUFF FOUND for P.O./Estimate # GOT YOUR SIX - MILITA
 PSA- S GOT YOUR SIX - BOB WOODRUFF FOUNDATION

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/2/2022	10:40 PM	:30	PSA	GOTYRSSP2130	0.00
7/5/2022	08:40 AM	:15	PSA	GOTYRSSP2115	0.00
7/7/2022	12:20 PM	:15	PSA	GOTYRSSP2115	0.00
7/9/2022	06:40 AM	:30	PSA	GOTYRSSP2130	0.00
7/12/2022	09:20 PM	:15	PSA	GOTYRSSP2115	0.00
7/14/2022	01:40 PM	:15	PSA	GOTYRSSP2115	0.00
7/16/2022	02:40 PM	:30	PSA	GOTYRSSP2130	0.00
7/19/2022	05:40 PM	:15	PSA	GOTYRSSP2115	0.00
7/21/2022	04:40 PM	:15	PSA	GOTYRSSP2115	0.00
7/23/2022	01:40 AM	:30	PSA	GOTYRSSP2130	0.00
7/26/2022	05:40 AM	:15	PSA	GOTYRSSP2115	0.00
7/28/2022	03:20 PM	:15	PSA	GOTYRSSP2115	0.00
7/30/2022	10:40 AM	:30	PSA	GOTYRSSP2130	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

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: 22070370
 Invoice Date: 7/31/2022
 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
7/1/2022	01:40 PM	:60	PSA	CNCS0461000	0.00
7/2/2022	09:40 AM	:30	PSA	CNCS0044000	0.00
7/2/2022	09:40 PM	:60	PSA	CNCS0461000	0.00
7/3/2022	06:40 AM	:60	PSA	CNCS0461000	0.00
7/4/2022	04:20 PM	:60	PSA	CNCS0461000	0.00
7/5/2022	12:40 AM	:30	PSA	CNCS0044000	0.00
7/5/2022	08:40 PM	:60	PSA	CNCS0461000	0.00
7/6/2022	08:40 AM	:60	PSA	CNCS0461000	0.00
7/7/2022	04:40 AM	:30	PSA	CNCS0044000	0.00
7/7/2022	10:40 PM	:60	PSA	CNCS0461000	0.00
7/8/2022	02:40 PM	:60	PSA	CNCS0461000	0.00
7/9/2022	06:40 PM	:30	PSA	CNCS0044000	0.00
7/9/2022	11:40 PM	:60	PSA	CNCS0461000	0.00
7/10/2022	03:40 AM	:60	PSA	CNCS0461000	0.00
7/11/2022	12:40 PM	:60	PSA	CNCS0461000	0.00
7/12/2022	05:40 AM	:30	PSA	CNCS0044000	0.00
7/12/2022	05:40 PM	:60	PSA	CNCS0461000	0.00
7/13/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
7/14/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
7/14/2022	11:40 AM	:30	PSA	CNCS0044000	0.00
7/15/2022	07:20 AM	:60	PSA	CNCS0461000	0.00
7/16/2022	04:40 PM	:60	PSA	CNCS0461000	0.00
7/16/2022	07:20 PM	:30	PSA	CNCS0044000	0.00
7/17/2022	01:40 AM	:60	PSA	CNCS0461000	0.00
7/18/2022	09:20 PM	:60	PSA	CNCS0461000	0.00
7/19/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
7/19/2022	10:40 AM	:30	PSA	CNCS0044000	0.00
7/20/2022	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: 22070370
 Invoice Date: 7/31/2022

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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/21/2022	08:40 AM	:30	PSA	CNCS0044000	0.00
7/21/2022	08:40 PM	:60	PSA	CNCS0461000	0.00
7/22/2022	01:40 PM	:60	PSA	CNCS0461000	0.00
7/23/2022	06:40 AM	:30	PSA	CNCS0044000	0.00
7/23/2022	12:40 PM	:60	PSA	CNCS0461000	0.00
7/24/2022	05:40 AM	:60	PSA	CNCS0461000	0.00
7/25/2022	03:40 AM	:60	PSA	CNCS0461000	0.00
7/26/2022	12:20 AM	:30	PSA	CNCS0044000	0.00
7/26/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
7/27/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
7/28/2022	11:40 AM	:60	PSA	CNCS0461000	0.00
7/28/2022	11:40 PM	:30	PSA	CNCS0044000	0.00
7/29/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
7/30/2022	05:40 PM	:60	PSA	CNCS0461000	0.00
7/30/2022	09:40 PM	:30	PSA	CNCS0044000	0.00
7/31/2022	10:40 AM	:60	PSA	CNCS0461000	0.00

44 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: 22070371
 Invoice Date: 7/31/2022
 Account ID: 0054
 Order ID: 0054-387
 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 / HELP UKRAINE for P.O./Estimate # HELP UKRAINE
 PSA- S

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
7/1/2022	07:40 AM	:30	PSA	HELP UKRAINE	0.00
7/1/2022	09:40 AM	:30	PSA	HELP UKRAINE	0.00
7/1/2022	02:40 PM	:30	PSA	HELP UKRAINE	0.00
7/1/2022	04:40 PM	:30	PSA	HELP UKRAINE	0.00
7/1/2022	11:40 PM	:30	PSA	HELP UKRAINE	0.00
7/2/2022	06:40 AM	:30	PSA	HELP UKRAINE	0.00
7/2/2022	08:40 AM	:30	PSA	HELP UKRAINE	0.00
7/2/2022	10:40 AM	:30	PSA	HELP UKRAINE	0.00
7/2/2022	05:40 PM	:30	PSA	HELP UKRAINE	0.00
7/2/2022	07:40 PM	:30	PSA	HELP UKRAINE	0.00
7/3/2022	07:40 AM	:30	PSA	HELP UKRAINE	0.00
7/3/2022	09:40 AM	:30	PSA	HELP UKRAINE	0.00
7/3/2022	12:40 PM	:30	PSA	HELP UKRAINE	0.00
7/3/2022	06:40 PM	:30	PSA	HELP UKRAINE	0.00
7/3/2022	10:40 PM	:30	PSA	HELP UKRAINE	0.00
7/4/2022	06:40 AM	:30	PSA	HELP UKRAINE	0.00
7/4/2022	08:40 AM	:30	PSA	HELP UKRAINE	0.00
7/4/2022	11:40 AM	:30	PSA	HELP UKRAINE	0.00
7/4/2022	03:40 PM	:30	PSA	HELP UKRAINE	0.00
7/4/2022	08:40 PM	:30	PSA	HELP UKRAINE	0.00
20 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: 22080361
 Invoice Date: 8/31/2022
 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
8/1/2022	04:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/1/2022	05:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/1/2022	10:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
8/2/2022	12:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
8/2/2022	09:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
8/2/2022	02:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
8/3/2022	08:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
8/3/2022	12:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
8/3/2022	06:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/4/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
8/4/2022	01:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
8/4/2022	09:20 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
8/5/2022	02:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
8/5/2022	10:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
8/5/2022	04:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
8/6/2022	05:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
8/6/2022	06:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
8/6/2022	11:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/7/2022	01:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
8/7/2022	03:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/7/2022	07:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/8/2022	09:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
8/8/2022	05:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
8/8/2022	08:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
8/9/2022	04:40 AM	:30	PSA	SU2CSPATRI30	0.00
8/9/2022	08:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
8/9/2022	12:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/10/2022	03:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
8/10/2022	02:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
8/10/2022	10:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
8/11/2022	07:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/11/2022	06:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/11/2022	09:20 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
8/12/2022	12:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
8/12/2022	10:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
8/12/2022	11:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	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: 22080361
 Invoice Date: 8/31/2022

Sponsor: PSA- S
 PSA- S

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
8/13/2022	02:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/13/2022	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
8/13/2022	04:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/14/2022	06:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
8/14/2022	11:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/14/2022	03:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/15/2022	04:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/15/2022	08:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/15/2022	05:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/16/2022	03:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
8/16/2022	02:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/16/2022	08:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/17/2022	01:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/17/2022	07:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/17/2022	07:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/18/2022	12:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/18/2022	09:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/18/2022	10:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
8/19/2022	05:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/19/2022	01:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/19/2022	11:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/20/2022	06:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/20/2022	04:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/20/2022	09:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/21/2022	08:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/21/2022	12:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
8/21/2022	10:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/22/2022	02:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
8/22/2022	02:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/22/2022	03:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/23/2022	03:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/23/2022	07:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/23/2022	08:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/24/2022	04:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
8/24/2022	05:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/24/2022	07:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/25/2022	01:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/25/2022	10:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/25/2022	06:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/26/2022	05:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/26/2022	09:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/26/2022	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
8/27/2022	11:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/27/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
8/27/2022	11:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/28/2022	12:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/28/2022	06:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/28/2022	10:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/29/2022	03:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
8/29/2022	07:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00

Continued

KWBX 940 AM Invoice

Invoice ID: 22080361
Invoice Date: 8/31/2022

Sponsor: PSA- S
PSA- S

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
8/29/2022	09:20 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
8/30/2022	04:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
8/30/2022	08:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
8/30/2022	05:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
8/31/2022	02:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
8/31/2022	02:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
8/31/2022	08:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	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: 22080367
 Invoice Date: 8/31/2022
 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
8/1/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/2/2022	11:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
8/3/2022	04:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/4/2022	08:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
8/5/2022	09:20 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/6/2022	01:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
8/7/2022	12:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
8/8/2022	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/9/2022	02:40 PM	:15	PSA	FRASES BUSTOS 4	0.00
8/10/2022	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/11/2022	10:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
8/12/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
8/13/2022	05:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
8/14/2022	11:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/15/2022	07:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/16/2022	06:20 PM	:15	PSA	FRASES BUSTOS 2	0.00
8/17/2022	07:20 AM	:30	PSA	FRASES BUSTOS 6	0.00
8/18/2022	03:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
8/19/2022	06:20 AM	:30	PSA	FRASES BUSTOS 6	0.00
8/20/2022	10:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
8/21/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/22/2022	08:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/23/2022	03:20 AM	:15	PSA	FRASES BUSTOS 5	0.00
8/24/2022	01:40 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: 22080367
Invoice Date: 8/31/2022

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
8/25/2022	09:20 PM	:15	PSA	FRASES BUSTOS 1	0.00
8/26/2022	04:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
8/27/2022	02:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
8/28/2022	12:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
8/29/2022	09:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
8/30/2022	02:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
8/31/2022	05:40 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: 22080371
Invoice Date: 8/31/2022
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
8/7/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
8/14/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
8/21/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	MENTAL HEALTH AFTER COVID	0.00
8/28/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	MENTAL HEALTH AFTER COVID	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: 22080373
 Invoice Date: 8/31/2022
 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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
8/3/2022	10:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/5/2022	06:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/10/2022	02:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/12/2022	05:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/17/2022	04:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/19/2022	03:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/24/2022	09:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/26/2022	08:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
8/31/2022	02:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00

9 Total Items Total Cost: \$0.00

Amount Due: \$0.00

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

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

Invoice ID: 22080378
 Invoice Date: 8/31/2022
 Account ID: 0054
 Order ID: 0054-384
 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 GOT YOUR SIX - BOB WOODRUFF FOUND for P.O./Estimate # GOT YOUR SIX - MILITA
 PSA- S GOT YOUR SIX - BOB WOODRUFF FOUNDATION

Date	Time	Length	Description	CopyID / ISCI Code	Cost
8/2/2022	07:40 PM	:15	PSA	GOTYRSSP2115	0.00
8/4/2022	12:40 AM	:15	PSA	GOTYRSSP2115	0.00
8/6/2022	11:40 AM	:30	PSA	GOTYRSSP2130	0.00
8/9/2022	09:40 AM	:15	PSA	GOTYRSSP2115	0.00
8/11/2022	08:40 AM	:15	PSA	GOTYRSSP2115	0.00
8/13/2022	09:40 PM	:30	PSA	GOTYRSSP2130	0.00
8/16/2022	10:40 PM	:15	PSA	GOTYRSSP2115	0.00
8/18/2022	06:20 PM	:15	PSA	GOTYRSSP2115	0.00
8/20/2022	05:40 PM	:30	PSA	GOTYRSSP2130	0.00
8/23/2022	06:40 AM	:15	PSA	GOTYRSSP2115	0.00
8/25/2022	02:40 PM	:15	PSA	GOTYRSSP2115	0.00
8/27/2022	01:40 AM	:30	PSA	GOTYRSSP2130	0.00
8/30/2022	10:40 AM	:15	PSA	GOTYRSSP2115	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**

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: 22080383
 Invoice Date: 8/31/2022
 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
8/1/2022	04:40 PM	:60	PSA	CNCS0461000	0.00
8/2/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
8/2/2022	06:40 PM	:30	PSA	CNCS0044000	0.00
8/3/2022	10:40 PM	:60	PSA	CNCS0461000	0.00
8/4/2022	01:40 AM	:30	PSA	CNCS0044000	0.00
8/4/2022	08:20 PM	:60	PSA	CNCS0461000	0.00
8/5/2022	01:40 PM	:60	PSA	CNCS0461000	0.00
8/6/2022	03:40 AM	:30	PSA	CNCS0044000	0.00
8/7/2022	12:20 AM	:60	PSA	CNCS0461000	0.00
8/8/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
8/9/2022	05:40 AM	:30	PSA	CNCS0044000	0.00
8/9/2022	07:40 PM	:60	PSA	CNCS0461000	0.00
8/10/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
8/11/2022	02:40 AM	:30	PSA	CNCS0044000	0.00
8/11/2022	12:40 PM	:60	PSA	CNCS0461000	0.00
8/12/2022	11:20 PM	:60	PSA	CNCS0461000	0.00
8/13/2022	08:40 AM	:60	PSA	CNCS0461000	0.00
8/13/2022	11:40 AM	:30	PSA	CNCS0044000	0.00
8/14/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
8/15/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
8/16/2022	02:20 PM	:60	PSA	CNCS0461000	0.00
8/16/2022	06:40 PM	:30	PSA	CNCS0044000	0.00
8/17/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
8/18/2022	06:40 AM	:60	PSA	CNCS0461000	0.00
8/18/2022	10:40 PM	:30	PSA	CNCS0044000	0.00
8/19/2022	09:20 PM	:60	PSA	CNCS0461000	0.00
8/20/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
8/20/2022	05:40 PM	:30	PSA	CNCS0044000	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: 22080383
 Invoice Date: 8/31/2022

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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
8/21/2022	08:40 PM	:60	PSA	CNCS0461000	0.00
8/22/2022	05:40 AM	:60	PSA	CNCS0461000	0.00
8/23/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
8/23/2022	04:40 PM	:30	PSA	CNCS0044000	0.00
8/24/2022	12:40 PM	:60	PSA	CNCS0461000	0.00
8/25/2022	08:40 AM	:60	PSA	CNCS0461000	0.00
8/25/2022	11:40 PM	:30	PSA	CNCS0044000	0.00
8/26/2022	11:40 AM	:60	PSA	CNCS0461000	0.00
8/27/2022	09:40 AM	:30	PSA	CNCS0044000	0.00
8/27/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
8/28/2022	07:40 PM	:60	PSA	CNCS0461000	0.00
8/29/2022	01:40 AM	:60	PSA	CNCS0461000	0.00
8/30/2022	04:20 AM	:60	PSA	CNCS0461000	0.00
8/30/2022	10:40 AM	:30	PSA	CNCS0044000	0.00
8/31/2022	10:40 PM	:60	PSA	CNCS0461000	0.00

43 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: 22090344
 Invoice Date: 9/30/2022
 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
9/1/2022	05:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
9/1/2022	10:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/1/2022	06:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/2/2022	09:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
9/2/2022	01:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
9/2/2022	04:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
9/3/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
9/3/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
9/3/2022	11:40 PM	:30	PSA	AUTISM AWARENESS	0.00
9/4/2022	03:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/4/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
9/4/2022	12:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
9/5/2022	04:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
9/5/2022	11:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
9/5/2022	03:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
9/6/2022	08:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
9/6/2022	05:40 PM	:30	PSA	GOTYRSSP2130	0.00
9/6/2022	10:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/7/2022	12:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
9/7/2022	02:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
9/7/2022	07:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
9/8/2022	02:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
9/8/2022	10:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
9/8/2022	08:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
9/9/2022	09:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/9/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/9/2022	08:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
9/10/2022	07:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	0.00
9/10/2022	01:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY ADMI	0.00
9/10/2022	06:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREPARE	0.00
9/11/2022	03:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
9/11/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
9/11/2022	11:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENESS	0.00
9/12/2022	05:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/12/2022	12:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/12/2022	11:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT MENTA	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

KWBV 940 AM Invoice

Invoice ID: 22090344
Invoice Date: 9/30/2022

Sponsor: PSA- S
PSA- S

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/13/2022	01:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
9/13/2022	08:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/13/2022	09:20 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/14/2022	12:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/14/2022	03:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/14/2022	07:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/15/2022	02:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/15/2022	05:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
9/15/2022	10:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
9/16/2022	02:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/16/2022	04:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/16/2022	08:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/17/2022	03:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/17/2022	07:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/17/2022	06:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/18/2022	05:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
9/18/2022	09:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
9/18/2022	11:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/19/2022	04:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/19/2022	08:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/19/2022	10:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/20/2022	06:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/20/2022	12:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/20/2022	03:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
9/21/2022	01:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
9/21/2022	01:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/21/2022	07:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/22/2022	02:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/22/2022	05:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/22/2022	10:40 PM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/23/2022	02:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
9/23/2022	04:40 PM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
9/23/2022	08:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
9/24/2022	05:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/24/2022	06:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/24/2022	11:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/25/2022	04:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
9/25/2022	09:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/25/2022	09:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
9/26/2022	03:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
9/26/2022	07:40 AM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00
9/26/2022	10:40 AM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/27/2022	12:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/27/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/27/2022	12:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/28/2022	02:40 AM	:30	PSA	VYSJ0475000H ST JUDE'S	0.00
9/28/2022	08:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
9/28/2022	11:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
9/29/2022	03:40 AM	:30	PSA	SARM0240000 SAMHSA ADULT M	0.00
9/29/2022	12:40 PM	:30	PSA	1SSA0044000 SOCIAL SECURITY	0.00

Continued

KWBY 940 AM Invoice

Invoice ID: 22090344
Invoice Date: 9/30/2022

Sponsor: PSA- S
PSA- S

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/29/2022	07:40 PM	:30	PSA	CNFE0357000 EMERGENCY PREP	0.00
9/30/2022	01:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/30/2022	01:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
9/30/2022	04:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	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: 22090350
 Invoice Date: 9/30/2022
 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
9/1/2022	07:40 PM	:15	PSA	FRASES BUSTOS 4	0.00
9/2/2022	06:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/3/2022	10:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
9/4/2022	12:20 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/5/2022	09:20 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/6/2022	11:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
9/7/2022	04:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/8/2022	11:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
9/9/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/10/2022	10:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
9/11/2022	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/12/2022	04:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/13/2022	05:40 PM	:15	PSA	FRASES BUSTOS 4	0.00
9/14/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/15/2022	08:40 AM	:15	PSA	FRASES BUSTOS 5	0.00
9/16/2022	02:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/17/2022	05:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
9/18/2022	09:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/19/2022	06:20 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/20/2022	03:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
9/21/2022	07:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/22/2022	03:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
9/23/2022	12:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/24/2022	12:20 PM	:15	PSA	FRASES BUSTOS 4	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: 22090350
Invoice Date: 9/30/2022

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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/25/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/26/2022	10:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
9/27/2022	01:40 AM	:15	PSA	FRASES BUSTOS 5	0.00
9/28/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
9/29/2022	05:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
9/30/2022	02:40 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: 22090354
 Invoice Date: 9/30/2022
 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

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/4/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	HEAD START EDUCATION	0.00
9/11/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	MENTAL HEALTH AFTER COVID	0.00
9/18/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	NEW RECORD- COVID VACCINES LATI	0.00
9/25/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	NEW RECORD- COVID VACCINES LATI	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: 22090356
 Invoice Date: 9/30/2022
 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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/2/2022	12:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/7/2022	04:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/9/2022	07:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/14/2022	07:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/16/2022	12:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/21/2022	11:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/23/2022	03:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/28/2022	01:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00
9/30/2022	09:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 SP	0.00

9 Total Items Total Cost: \$0.00

Amount Due: \$0.00

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

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

Invoice ID: 22090361
 Invoice Date: 9/30/2022
 Account ID: 0054
 Order ID: 0054-384
 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 GOT YOUR SIX - BOB WOODRUFF FOUND for P.O./Estimate # GOT YOUR SIX - MILITA
 PSA- S GOT YOUR SIX - BOB WOODRUFF FOUNDATION

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/1/2022	07:40 AM	:15	PSA	GOTYRSSP2115	0.00
9/3/2022	11:20 PM	:30	PSA	GOTYRSSP2130	0.00
9/6/2022	01:40 PM	:15	PSA	GOTYRSSP2115	0.00
9/8/2022	03:40 PM	:15	PSA	GOTYRSSP2115	0.00
9/10/2022	04:40 PM	:30	PSA	GOTYRSSP2130	0.00
9/13/2022	05:40 AM	:15	PSA	GOTYRSSP2115	0.00
9/15/2022	10:40 AM	:15	PSA	GOTYRSSP2115	0.00
9/17/2022	09:40 AM	:30	PSA	GOTYRSSP2130	0.00
9/20/2022	12:40 AM	:15	PSA	GOTYRSSP2115	0.00
9/22/2022	09:20 PM	:15	PSA	GOTYRSSP2115	0.00
9/24/2022	04:40 AM	:30	PSA	GOTYRSSP2130	0.00
9/27/2022	07:40 PM	:15	PSA	GOTYRSSP2115	0.00
9/29/2022	06:40 PM	:15	PSA	GOTYRSSP2115	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

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: 22090366
 Invoice Date: 9/30/2022
 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
9/1/2022	12:40 AM	:30	PSA	CNCS0044000	0.00
9/1/2022	06:40 AM	:60	PSA	CNCS0461000	0.00
9/2/2022	03:40 AM	:60	PSA	CNCS0461000	0.00
9/3/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
9/3/2022	02:40 PM	:30	PSA	CNCS0044000	0.00
9/4/2022	01:40 PM	:60	PSA	CNCS0461000	0.00
9/5/2022	09:20 PM	:60	PSA	CNCS0461000	0.00
9/6/2022	08:40 AM	:30	PSA	CNCS0044000	0.00
9/6/2022	04:40 PM	:60	PSA	CNCS0461000	0.00
9/7/2022	06:40 PM	:60	PSA	CNCS0461000	0.00
9/8/2022	02:40 AM	:60	PSA	CNCS0461000	0.00
9/8/2022	12:40 PM	:30	PSA	CNCS0044000	0.00
9/9/2022	05:40 PM	:60	PSA	CNCS0461000	0.00
9/10/2022	05:40 AM	:60	PSA	CNCS0461000	0.00
9/10/2022	08:40 PM	:30	PSA	CNCS0044000	0.00
9/11/2022	01:40 AM	:60	PSA	CNCS0461000	0.00
9/12/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
9/13/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
9/13/2022	11:40 PM	:30	PSA	CNCS0044000	0.00
9/14/2022	11:40 AM	:60	PSA	CNCS0461000	0.00
9/15/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
9/15/2022	01:40 PM	:30	PSA	CNCS0044000	0.00
9/16/2022	02:40 PM	:60	PSA	CNCS0461000	0.00
9/17/2022	06:20 AM	:30	PSA	CNCS0044000	0.00
9/17/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
9/18/2022	03:40 AM	:60	PSA	CNCS0461000	0.00
9/19/2022	04:40 AM	:60	PSA	CNCS0461000	0.00
27 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: 22090371
 Invoice Date: 9/30/2022
 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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
9/16/2022	08:40 AM	:15	Spot	CNMS0012000	0.00
9/16/2022	10:40 AM	:30	Spot	CNMS0011000	0.00
9/17/2022	06:40 AM	:30	Spot	CNMS0011000	0.00
9/17/2022	12:40 PM	:15	Spot	CNMS0012000	0.00
9/18/2022	07:40 AM	:15	Spot	CNMS0012000	0.00
9/18/2022	01:40 PM	:30	Spot	CNMS0011000	0.00
9/19/2022	11:40 AM	:15	Spot	CNMS0012000	0.00
9/19/2022	06:40 PM	:30	Spot	CNMS0011000	0.00
9/20/2022	05:40 PM	:30	Spot	CNMS0011000	0.00
9/20/2022	07:40 PM	:15	Spot	CNMS0012000	0.00
9/21/2022	03:40 PM	:15	Spot	CNMS0012000	0.00
9/21/2022	09:20 PM	:30	Spot	CNMS0011000	0.00
9/22/2022	09:40 AM	:30	Spot	CNMS0011000	0.00
9/22/2022	08:40 PM	:15	Spot	CNMS0012000	0.00
9/23/2022	02:40 PM	:30	Spot	CNMS0011000	0.00
9/23/2022	11:40 PM	:15	Spot	CNMS0012000	0.00
9/24/2022	06:40 AM	:15	Spot	CNMS0012000	0.00
9/24/2022	12:40 PM	:30	Spot	CNMS0011000	0.00
9/25/2022	07:40 AM	:15	Spot	CNMS0012000	0.00
9/25/2022	01:40 PM	:30	Spot	CNMS0011000	0.00
9/26/2022	11:40 AM	:30	Spot	CNMS0011000	0.00
9/26/2022	06:40 PM	:15	Spot	CNMS0012000	0.00
9/27/2022	08:40 AM	:30	Spot	CNMS0011000	0.00
9/27/2022	10:40 PM	:15	Spot	CNMS0012000	0.00
9/28/2022	06:40 AM	:30	Spot	CNMS0011000	0.00
9/28/2022	05:40 PM	:15	Spot	CNMS0012000	0.00
9/29/2022	12:40 PM	:30	Spot	CNMS0011000	0.00
9/29/2022	08:40 PM	:15	Spot	CNMS0012000	0.00
9/30/2022	10:40 AM	:15	Spot	CNMS0012000	0.00
9/30/2022	03:40 PM	:30	Spot	CNMS0011000	0.00
30 Total Items				Total Cost:	\$0.00

Amount Due: \$0.00

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:
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 _____, NOTARY PUBLIC