



STATION ISSUES PUBLIC SERVICE & PUBLIC AFFAIRS

1st QUARTER – 2022

KWBY 940 AM

The following public service announcements on the attached sheet were aired during the period January 1st to March 31st, 2022, 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

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

KWBY 940 AM Invoice

Invoice ID: 22010354
 Invoice Date: 1/31/2022
 Account ID: 0054
 Order ID: 0054-375
 Account Rep: HOUSE ACCOUNTS/ AMAI

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
1/2/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	BOOSTER AND KIDS SHOTS COVID	0.00
1/9/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	BOOSTER AND KIDS SHOTS COVID	0.00
1/16/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	COVID TEST VACCINES	0.00
1/23/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	COVID TEST VACCINES	0.00
1/30/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	PROJECT ACCESS NOW	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: 22010364
 Invoice Date: 1/31/2022
 Account ID: 0054
 Order ID: 0054-384
 Account Rep: HOUSE ACCOUNTS/ AMAI

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 for P.O./Estimate # GOT YOUR SIX - MILITARY VETERANS & HAVING
 PSA- S GOT YOUR SIX - BOB WOODRUFF FOUNDATION

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/1/2022	01:40 PM	:30	PSA	GOTYRSSP2130	0.00
1/4/2022	09:40 AM	:15	PSA	GOTYRSSP2115	0.00
1/6/2022	07:40 PM	:15	PSA	GOTYRSSP2115	0.00
1/8/2022	04:40 PM	:30	PSA	GOTYRSSP2130	0.00
1/11/2022	01:40 PM	:15	PSA	GOTYRSSP2115	0.00
1/13/2022	06:40 PM	:15	PSA	GOTYRSSP2115	0.00
1/15/2022	04:40 PM	:30	PSA	GOTYRSSP2130	0.00
1/18/2022	09:40 AM	:15	PSA	GOTYRSSP2115	0.00
1/20/2022	04:40 PM	:15	PSA	GOTYRSSP2115	0.00
1/22/2022	10:40 AM	:30	PSA	GOTYRSSP2130	0.00
1/25/2022	03:20 PM	:15	PSA	GOTYRSSP2115	0.00
1/27/2022	02:40 PM	:15	PSA	GOTYRSSP2115	0.00
1/29/2022	05:40 PM	: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: 22010358
 Invoice Date: 1/31/2022
 Account ID: 0054
 Order ID: 0054-383
 Account Rep: HOUSE ACCOUNTS/ AMAI

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

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/5/2022	06:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/7/2022	06:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/12/2022	07:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/14/2022	01:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/19/2022	05:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/21/2022	04:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/26/2022	12:20 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
1/28/2022	05:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	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

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: 22010350
 Invoice Date: 1/31/2022
 Account ID: 0054
 Order ID: 0054-374
 Account Rep: HOUSE ACCOUNTS/ AMAI

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

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

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

Invoice ID: 22010350
Invoice Date: 1/31/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/25/2022	04:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
1/26/2022	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
1/27/2022	02:20 PM	:15	PSA	FRASES BUSTOS 1	0.00
1/28/2022	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
1/29/2022	02:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
1/30/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
1/31/2022	12:40 PM	: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: 22010344
 Invoice Date: 1/31/2022
 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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/2/2022	01:40 PM	:60	PSA	CNVE0966000	0.00
1/2/2022	05:40 PM	:30	PSA	CNVE0964000	0.00
1/3/2022	11:40 AM	:30	PSA	CNVE0964000	0.00
1/3/2022	06:40 PM	:60	PSA	CNVE0966000	0.00
1/5/2022	09:40 AM	:60	PSA	CNVE0966000	0.00
1/5/2022	11:40 AM	:30	PSA	CNVE0964000	0.00
1/7/2022	07:40 AM	:60	PSA	CNVE0966000	0.00
1/7/2022	08:40 AM	:30	PSA	CNVE0964000	0.00
1/9/2022	03:40 PM	:30	PSA	CNVE0964000	0.00
1/9/2022	05:40 PM	:60	PSA	CNVE0966000	0.00
1/10/2022	08:40 AM	:30	PSA	CNVE0964000	0.00
1/10/2022	02:40 PM	:60	PSA	CNVE0966000	0.00
1/11/2022	06:40 AM	:30	PSA	CNVE0964000	0.00
1/11/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
1/11/2022	01:40 PM	:30	PSA	CNVE0964000	0.00
1/11/2022	04:40 PM	:30	PSA	CNVE0964000	0.00
1/12/2022	02:40 PM	:30	PSA	CNVE0964000	0.00
1/12/2022	06:40 PM	:60	PSA	CNVE0966000	0.00
1/14/2022	06:40 AM	:30	PSA	CNVE0964000	0.00
1/14/2022	03:40 PM	:60	PSA	CNVE0966000	0.00
1/16/2022	09:40 AM	:60	PSA	CNVE0966000	0.00
1/16/2022	04:40 PM	:30	PSA	CNVE0964000	0.00
1/17/2022	04:40 PM	:30	PSA	CNVE0964000	0.00
1/17/2022	06:40 PM	:60	PSA	CNVE0966000	0.00
1/19/2022	12:40 PM	:30	PSA	CNVE0964000	0.00
1/19/2022	07:40 PM	:60	PSA	CNVE0966000	0.00
1/21/2022	07:40 AM	:60	PSA	CNVE0966000	0.00
1/21/2022	05:40 PM	:30	PSA	CNVE0964000	0.00
1/23/2022	07:40 AM	:60	PSA	CNVE0966000	0.00
1/23/2022	06:40 PM	:30	PSA	CNVE0964000	0.00
1/24/2022	09:40 AM	:30	PSA	CNVE0964000	0.00
1/24/2022	10:40 AM	:60	PSA	CNVE0966000	0.00
1/26/2022	11:40 AM	:30	PSA	CNVE0964000	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

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

Invoice ID: 22010344
Invoice Date: 1/31/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/26/2022	01:40 PM	:60	PSA	CNVE0966000	0.00
1/28/2022	08:40 AM	:60	PSA	CNVE0966000	0.00
1/28/2022	12:40 PM	:30	PSA	CNVE0964000	0.00
1/30/2022	01:40 PM	:30	PSA	CNVE0964000	0.00
1/30/2022	03:40 PM	:60	PSA	CNVE0966000	0.00
1/31/2022	09:40 AM	:30	PSA	CNVE0964000	0.00
1/31/2022	06:40 PM	:60	PSA	CNVE0966000	0.00

40 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: 22010340
 Invoice Date: 1/31/2022
 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
1/1/2022	08:40 AM	:30	PSA	CNFT0480000	0.00
1/4/2022	08:40 AM	:30	PSA	CNFT0480000	0.00
1/6/2022	01:40 PM	:30	PSA	CNFT0480000	0.00
1/8/2022	04:40 PM	:30	PSA	CNFT0480000	0.00
1/11/2022	06:40 AM	:30	PSA	CNFT0480000	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: 22010335
 Invoice Date: 1/31/2022
 Account ID: 0054
 Order ID: 0054-353
 Account Rep: HOUSE ACCOUNTS/ AMAI

Amount Due: \$0.00
 Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

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

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/1/2022	01:40 PM	:30	PSA	CNFA1107000	0.00
1/2/2022	03:40 PM	:60	PSA	CNFA1108000	0.00
1/3/2022	04:40 PM	:60	PSA	CNFA1108000	0.00
1/4/2022	02:40 PM	:30	PSA	CNFA1107000	0.00
1/5/2022	10:40 AM	:60	PSA	CNFA1108000	0.00
1/6/2022	07:40 AM	:30	PSA	CNFA1107000	0.00
1/7/2022	02:40 PM	:60	PSA	CNFA1108000	0.00
1/8/2022	03:40 PM	:30	PSA	CNFA1107000	0.00
1/9/2022	04:40 PM	:60	PSA	CNFA1108000	0.00
1/10/2022	04:40 PM	:60	PSA	CNFA1108000	0.00
1/11/2022	05:40 PM	:30	PSA	CNFA1107000	0.00
1/12/2022	07:40 PM	:60	PSA	CNFA1108000	0.00
1/13/2022	11:40 AM	:30	PSA	CNFA1107000	0.00
1/14/2022	02:40 PM	:60	PSA	CNFA1108000	0.00
1/15/2022	11:40 AM	:30	PSA	CNFA1107000	0.00
1/16/2022	05:40 PM	:60	PSA	CNFA1108000	0.00
1/17/2022	06:40 AM	:60	PSA	CNFA1108000	0.00
1/18/2022	11:40 AM	:30	PSA	CNFA1107000	0.00
1/19/2022	07:40 PM	:60	PSA	CNFA1108000	0.00
1/20/2022	06:40 PM	:30	PSA	CNFA1107000	0.00
1/21/2022	07:40 PM	:60	PSA	CNFA1108000	0.00
1/22/2022	06:40 PM	:30	PSA	CNFA1107000	0.00
1/23/2022	04:40 PM	:60	PSA	CNFA1108000	0.00
1/24/2022	12:40 PM	:60	PSA	CNFA1108000	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

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

Invoice ID: 22010335
Invoice Date: 1/31/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/25/2022	02:40 PM	:30	PSA	CNFA1107000	0.00
1/26/2022	07:40 PM	:60	PSA	CNFA1108000	0.00
1/27/2022	06:40 PM	:30	PSA	CNFA1107000	0.00
1/28/2022	03:40 PM	:60	PSA	CNFA1108000	0.00
1/29/2022	06:40 PM	:30	PSA	CNFA1107000	0.00
1/30/2022	11:40 AM	:60	PSA	CNFA1108000	0.00
1/31/2022	06:40 PM	:60	PSA	CNFA1108000	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: 22010329
 Invoice Date: 1/31/2022
 Account ID: 0054
 Order ID: 0054-318
 Account Rep: HOUSE ACCOUNTS/ AMAI

Amount Due: \$0.00

Amount Paid: _____

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

Sponsor: PSA- S
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/1/2022	09:40 AM	:30	PSA	VYSJ0475000H	0.00
1/1/2022	10:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
1/1/2022	12:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
1/2/2022	09:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
1/2/2022	09:40 AM	:30	PSA	1SSA0044000	0.00
1/2/2022	11:40 AM	:30	PSA	SARM0240000	0.00
1/3/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
1/3/2022	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
1/3/2022	02:40 PM	:30	PSA	VYSJ0475000H	0.00
1/4/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
1/4/2022	10:40 AM	:30	PSA	1SSA0044000	0.00
1/4/2022	05:40 PM	:30	PSA	SARM0240000	0.00
1/5/2022	08:40 AM	:30	PSA	VYSJ0475000H	0.00
1/5/2022	01:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
1/5/2022	05:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
1/6/2022	09:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
1/6/2022	04:40 PM	:30	PSA	1SSA0044000	0.00
1/6/2022	06:40 PM	:30	PSA	SARM0240000	0.00
1/7/2022	10:40 AM	:30	PSA	VYSJ0475000H	0.00
1/7/2022	03:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
1/7/2022	04:40 PM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
1/8/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
1/8/2022	11:40 AM	:30	PSA	1SSA0044000	0.00
1/8/2022	01:40 PM	:30	PSA	SARM0240000	0.00
1/9/2022	08:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
1/9/2022	10:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
1/9/2022	01:40 PM	:30	PSA	VYSJ0475000H	0.00
1/10/2022	06:40 AM	:30	PSA	SARM0240000	0.00
1/10/2022	10:40 AM	:30	PSA	1SSA0044000	0.00
1/10/2022	03:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
1/11/2022	09:40 AM	:30	PSA	7CRO0092000 DONACION DE ORGAN	0.00
1/11/2022	04:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWAREN	0.00
1/11/2022	06:40 PM	:30	PSA	VYSJ0475000H	0.00
1/12/2022	03:40 PM	:30	PSA	1SSA0044000	0.00
1/12/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
1/12/2022	05:40 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

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

KWBY 940 AM Invoice

Sponsor: PSA- S
PSA- S

Invoice ID: 22010329
Invoice Date: 1/31/2022

Page 2

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

Continued

KWBY 940 AM Invoice

Sponsor: PSA- S
PSA- S

Invoice ID: 22010329
Invoice Date: 1/31/2022

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
1/30/2022	01:40 PM	:30	PSA	SARM0240000	0.00
1/30/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
1/31/2022	06:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
1/31/2022	08:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
1/31/2022	10:40 AM	:30	PSA	VYSJ0475000H	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: 22020467
 Invoice Date: 2/28/2022
 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
2/6/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	DIA ACCION INMIGRANTE FEB	0.00
2/13/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	CAUSA, REPRESENTACION LEGAL UN	0.00
2/20/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	LATINO BUILT	0.00
2/27/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	REPRESENTACION LEGAL UNIVERSA	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: 22020439
 Invoice Date: 2/28/2022
 Account ID: 0054
 Order ID: 0054-384
 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 GOT YOUR SIX for P.O./Estimate # GOT YOUR SIX - MILITARY VETERANS & HAVING
 PSA- S GOT YOUR SIX - BOB WOODRUFF FOUNDATION

Date	Time	Length	Description	CopyID / ISCI Code	Cost
2/1/2022	03:40 PM	:15	PSA	GOTYRSSP2115	0.00
2/3/2022	11:40 AM	:15	PSA	GOTYRSSP2115	0.00
2/5/2022	02:40 PM	:30	PSA	GOTYRSSP2130	0.00
2/8/2022	09:40 AM	:15	PSA	GOTYRSSP2115	0.00
2/10/2022	02:40 PM	:15	PSA	GOTYRSSP2115	0.00
2/12/2022	12:40 PM	:30	PSA	GOTYRSSP2130	0.00
2/15/2022	08:40 AM	:15	PSA	GOTYRSSP2115	0.00
2/17/2022	10:40 AM	:15	PSA	GOTYRSSP2115	0.00
2/19/2022	08:40 AM	:30	PSA	GOTYRSSP2130	0.00
2/22/2022	01:40 PM	:15	PSA	GOTYRSSP2115	0.00
2/24/2022	10:40 AM	:15	PSA	GOTYRSSP2115	0.00
2/26/2022	11:40 AM	:30	PSA	GOTYRSSP2130	0.00

12 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: 22020433
 Invoice Date: 2/28/2022
 Account ID: 0054
 Order ID: 0054-383
 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 NLCRT LUNG CA for P.O./Estimate # NLCRT LUNG CANCER
 PSA- S NLCRT LUNG CANCER

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
2/2/2022	06:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/4/2022	04:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/9/2022	03:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/11/2022	10:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/16/2022	01:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/18/2022	09:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/23/2022	06:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
2/25/2022	07:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	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

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: 22020425
 Invoice Date: 2/28/2022
 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
2/1/2022	03:40 PM	:15	PSA	FRASES BUSTOS 3	0.00
2/2/2022	05:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
2/3/2022	11:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
2/4/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/5/2022	02:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
2/6/2022	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
2/7/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/8/2022	10:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
2/9/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/10/2022	11:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
2/11/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/12/2022	10:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
2/13/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/14/2022	06:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
2/15/2022	10:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
2/16/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
2/18/2022	09:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/19/2022	06:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
2/20/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/21/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/22/2022	01:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
2/23/2022	02:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
2/24/2022	11:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
2/25/2022	05:40 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

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

Invoice ID: 22020425
Invoice Date: 2/28/2022

Date	Time	Length	Description	CopyID / ISCI Code	Cost
2/26/2022	11:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
2/27/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
2/28/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
27 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: 22020419
 Invoice Date: 2/28/2022
 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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
2/2/2022	01:40 PM	:30	PSA	CNVE0964000	0.00
2/2/2022	04:40 PM	:60	PSA	CNVE0966000	0.00
2/4/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
2/4/2022	07:40 PM	:60	PSA	CNVE0966000	0.00
2/6/2022	09:40 AM	:60	PSA	CNVE0966000	0.00
2/6/2022	03:40 PM	:30	PSA	CNVE0964000	0.00
2/7/2022	02:40 PM	:60	PSA	CNVE0966000	0.00
2/7/2022	05:40 PM	:30	PSA	CNVE0964000	0.00
2/9/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
2/9/2022	12:40 PM	:60	PSA	CNVE0966000	0.00
2/11/2022	02:40 PM	:60	PSA	CNVE0966000	0.00
2/11/2022	06:40 PM	:30	PSA	CNVE0964000	0.00
2/13/2022	08:40 AM	:60	PSA	CNVE0966000	0.00
2/13/2022	06:40 PM	:30	PSA	CNVE0964000	0.00
2/14/2022	06:40 AM	:30	PSA	CNVE0964000	0.00
2/14/2022	05:40 PM	:60	PSA	CNVE0966000	0.00
2/16/2022	09:40 AM	:30	PSA	CNVE0964000	0.00
2/16/2022	04:40 PM	:60	PSA	CNVE0966000	0.00
2/18/2022	08:40 AM	:60	PSA	CNVE0966000	0.00
2/18/2022	03:40 PM	:30	PSA	CNVE0964000	0.00
2/20/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
2/20/2022	05:40 PM	:60	PSA	CNVE0966000	0.00
2/21/2022	11:40 AM	:30	PSA	CNVE0964000	0.00
2/21/2022	02:40 PM	:60	PSA	CNVE0966000	0.00
2/23/2022	08:40 AM	:30	PSA	CNVE0964000	0.00
2/23/2022	05:40 PM	:60	PSA	CNVE0966000	0.00
2/25/2022	09:40 AM	:30	PSA	CNVE0964000	0.00
2/25/2022	02:40 PM	:60	PSA	CNVE0966000	0.00
2/27/2022	07:40 AM	:60	PSA	CNVE0966000	0.00
2/27/2022	11:40 AM	:30	PSA	CNVE0964000	0.00
2/28/2022	09:40 AM	:60	PSA	CNVE0966000	0.00
2/28/2022	12:40 PM	:30	PSA	CNVE0964000	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

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

Invoice ID: 22020419
Invoice Date: 2/28/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
			32 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: 22020414
 Invoice Date: 2/28/2022
 Account ID: 0054
 Order ID: 0054-353
 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 ENDING HUNGER for P.O./Estimate # ENDING HUNGER
 PSA- S

Date	Time	Length	Description	CopyID / ISCI Code	Cost
2/1/2022	01:40 PM	:30	PSA	CNFA1107000	0.00
2/2/2022	10:40 AM	:60	PSA	CNFA1108000	0.00
2/3/2022	01:40 PM	:30	PSA	CNFA1107000	0.00
2/4/2022	05:40 PM	:60	PSA	CNFA1108000	0.00
2/5/2022	08:40 AM	:30	PSA	CNFA1107000	0.00
2/6/2022	01:40 PM	:60	PSA	CNFA1108000	0.00
2/7/2022	01:40 PM	:60	PSA	CNFA1108000	0.00
2/8/2022	07:40 AM	:30	PSA	CNFA1107000	0.00
2/9/2022	06:40 PM	:60	PSA	CNFA1108000	0.00
2/10/2022	05:40 PM	:30	PSA	CNFA1107000	0.00
2/11/2022	07:40 PM	:60	PSA	CNFA1108000	0.00
2/12/2022	11:40 AM	:30	PSA	CNFA1107000	0.00
2/13/2022	04:40 PM	:60	PSA	CNFA1108000	0.00
2/14/2022	06:40 PM	:60	PSA	CNFA1108000	0.00
2/15/2022	06:40 PM	:30	PSA	CNFA1107000	0.00
2/16/2022	10:40 AM	:60	PSA	CNFA1108000	0.00
2/17/2022	12:40 PM	:30	PSA	CNFA1107000	0.00
2/18/2022	12:40 PM	:60	PSA	CNFA1108000	0.00
2/19/2022	04:40 PM	:30	PSA	CNFA1107000	0.00
2/20/2022	02:40 PM	:60	PSA	CNFA1108000	0.00
2/21/2022	03:40 PM	:60	PSA	CNFA1108000	0.00
2/22/2022	11:40 AM	:30	PSA	CNFA1107000	0.00
2/23/2022	04:40 PM	:60	PSA	CNFA1108000	0.00
23 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: 22020408
 Invoice Date: 2/28/2022
 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

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

Sponsor: PSA- S
PSA- S

Invoice ID: 22020408
Invoice Date: 2/28/2022

Date	Time	Length	Description	CopyID / ISCI Code	Cost
2/13/2022	10:40 AM	:30	PSA	SARM0240000	0.00
2/13/2022	05:40 PM	:30	PSA	CNFE0357000	0.00
2/13/2022	06:40 PM	:30	PSA	1SSA0044000	0.00
2/14/2022	07:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
2/14/2022	12:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
2/14/2022	04:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
2/15/2022	09:40 AM	:30	PSA	SARM0240000	0.00
2/15/2022	11:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
2/15/2022	03:40 PM	:30	PSA	VYSJ0475000H	0.00
2/16/2022	07:40 AM	:30	PSA	1SSA0044000	0.00
2/16/2022	11:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
2/16/2022	01:40 PM	:30	PSA	CNFE0357000	0.00
2/17/2022	08:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
2/17/2022	09:40 AM	:30	PSA	VYSJ0475000H	0.00
2/17/2022	11:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
2/18/2022	06:40 AM	:30	PSA	SARM0240000	0.00
2/18/2022	01:40 PM	:30	PSA	1SSA0044000	0.00
2/18/2022	02:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
2/19/2022	06:40 AM	:30	PSA	CNFE0357000	0.00
2/19/2022	03:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
2/19/2022	05:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
2/20/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
2/20/2022	01:40 PM	:30	PSA	VYSJ0475000H	0.00
2/20/2022	06:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
2/21/2022	09:40 AM	:30	PSA	SARM0240000	0.00
2/21/2022	12:40 PM	:30	PSA	1SSA0044000	0.00
2/21/2022	02:40 PM	:30	PSA	CNFE0357000	0.00
2/22/2022	06:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
2/22/2022	09:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
2/22/2022	04:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
2/23/2022	10:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
2/23/2022	02:40 PM	:30	PSA	VYSJ0475000H	0.00
2/23/2022	06:40 PM	:30	PSA	SARM0240000	0.00
2/24/2022	06:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
2/24/2022	08:40 AM	:30	PSA	CNFE0357000	0.00
2/24/2022	09:40 AM	:30	PSA	1SSA0044000	0.00
2/25/2022	03:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
2/25/2022	04:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
2/25/2022	05:40 PM	:30	PSA	VYSJ0475000H	0.00
2/26/2022	06:40 AM	:30	PSA	1SSA0044000	0.00
2/26/2022	08:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
2/26/2022	09:40 AM	:30	PSA	SARM0240000	0.00
2/27/2022	09:40 AM	:30	PSA	CNFE0357000	0.00
2/27/2022	09:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
2/27/2022	01:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
2/28/2022	06:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
2/28/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
2/28/2022	11:40 AM	:30	PSA	VYSJ0475000H	0.00
84 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: 22030433
 Invoice Date: 3/31/2022
 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
3/6/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	INTERNATIONAL WOMEN DAY	0.00
3/13/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	VACUNA COVID 3/13/22	0.00
3/20/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	VACUNA COVID 3/13/22	0.00
3/27/2022	02:00 PM	15:00	PUBLIC AFFAIRS PROGRAM	COVID VACCINE/ ASSISTANCE PROG	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: 22030416
 Invoice Date: 3/31/2022
 Account ID: 0054
 Order ID: 0054-385
 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 CHILD CAR SAF for P.O./Estimate # CHILD CAR SAFETY
 PSA- S CHILD CAR SAFETY

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/12/2022	11:40 AM	:60	PSA	CNCS0461000	0.00
3/12/2022	03:40 PM	:30	PSA	CNCS0044000	0.00
3/13/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
3/14/2022	12:40 PM	:60	PSA	CNCS0461000	0.00
3/15/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
3/15/2022	10:40 AM	:30	PSA	CNCS0044000	0.00
3/16/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
3/17/2022	08:40 AM	:30	PSA	CNCS0044000	0.00
3/17/2022	04:40 PM	:60	PSA	CNCS0461000	0.00
3/18/2022	02:40 PM	:60	PSA	CNCS0461000	0.00
3/19/2022	07:40 AM	:30	PSA	CNCS0044000	0.00
3/19/2022	08:40 AM	:60	PSA	CNCS0461000	0.00
3/20/2022	04:40 PM	:60	PSA	CNCS0461000	0.00
3/21/2022	06:40 AM	:60	PSA	CNCS0461000	0.00
3/22/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
3/22/2022	05:40 PM	:30	PSA	CNCS0044000	0.00
3/23/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
3/24/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
3/24/2022	02:40 PM	:30	PSA	CNCS0044000	0.00
3/25/2022	12:40 PM	:60	PSA	CNCS0461000	0.00
3/26/2022	11:40 AM	:60	PSA	CNCS0461000	0.00
3/26/2022	02:40 PM	:30	PSA	CNCS0044000	0.00
3/27/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
3/28/2022	09:40 AM	:60	PSA	CNCS0461000	0.00
3/29/2022	03:40 PM	:60	PSA	CNCS0461000	0.00
3/29/2022	05:40 PM	:30	PSA	CNCS0044000	0.00
3/30/2022	10:40 AM	:60	PSA	CNCS0461000	0.00
3/31/2022	07:40 AM	:60	PSA	CNCS0461000	0.00
3/31/2022	07:40 PM	:30	PSA	CNCS0044000	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

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

Invoice ID: 22030416
Invoice Date: 3/31/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
			29 Total Items	Total Cost:	0.00

Amount Due:

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: 22030410
 Invoice Date: 3/31/2022
 Account ID: 0054
 Order ID: 0054-384
 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 GOT YOUR SIX for P.O./Estimate # GOT YOUR SIX - MILITARY VETERANS & HAVING
 PSA- S GOT YOUR SIX - BOB WOODRUFF FOUNDATION

Page 1

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/1/2022	09:40 AM	:15	PSA	GOTYRSSP2115	0.00
3/3/2022	11:40 AM	:15	PSA	GOTYRSSP2115	0.00
3/5/2022	10:40 AM	:30	PSA	GOTYRSSP2130	0.00
3/8/2022	11:40 AM	:15	PSA	GOTYRSSP2115	0.00
3/10/2022	01:40 PM	:15	PSA	GOTYRSSP2115	0.00
3/12/2022	04:40 PM	:30	PSA	GOTYRSSP2130	0.00
3/15/2022	01:40 PM	:15	PSA	GOTYRSSP2115	0.00
3/17/2022	05:40 PM	:15	PSA	GOTYRSSP2115	0.00
3/19/2022	05:40 PM	:30	PSA	GOTYRSSP2130	0.00
3/22/2022	10:40 AM	:15	PSA	GOTYRSSP2115	0.00
3/24/2022	08:40 AM	:15	PSA	GOTYRSSP2115	0.00
3/26/2022	01:40 PM	:30	PSA	GOTYRSSP2130	0.00
3/29/2022	12:40 PM	:15	PSA	GOTYRSSP2115	0.00
3/31/2022	02:40 PM	:15	PSA	GOTYRSSP2115	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

STATE OF: OREGON
 COUNTY OF:

Subscribed and sworn before me this _____ day of _____

_____, NOTARY PUBLIC

KWBY 940 AM Invoice

Invoice ID: 22030404
 Invoice Date: 3/31/2022
 Account ID: 0054
 Order ID: 0054-383
 Account Rep: HOUSE ACCOUNTS/ AMA

Amount Due: \$0.00
 Amount Paid: _____

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

PSA-S

PLEASE REMIT PAYMENT TO
 DISTELL RADIO GROUP
 5110 SE STARK STREET

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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/2/2022	01:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/4/2022	06:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/9/2022	11:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/11/2022	12:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/16/2022	10:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/18/2022	04:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/23/2022	02:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/25/2022	10:40 AM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	0.00
3/30/2022	03:40 PM	:30	PSA	LUNG_CANCER_SCREENING_2021 S	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: 22030396
 Invoice Date: 3/31/2022
 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
3/1/2022	09:40 AM	:15	PSA	FRASES BUSTOS 5	0.00
3/2/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/3/2022	03:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
3/4/2022	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
3/5/2022	04:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
3/6/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/7/2022	12:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
3/8/2022	11:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
3/9/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/10/2022	10:40 AM	:15	PSA	FRASES BUSTOS 4	0.00
3/11/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/12/2022	02:40 PM	:15	PSA	FRASES BUSTOS 5	0.00
3/13/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/14/2022	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/15/2022	11:40 AM	:15	PSA	FRASES BUSTOS 1	0.00
3/16/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/17/2022	11:40 AM	:15	PSA	FRASES BUSTOS 2	0.00
3/18/2022	01:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
3/19/2022	07:40 AM	:15	PSA	FRASES BUSTOS 3	0.00
3/20/2022	11:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/21/2022	06:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/22/2022	01:40 PM	:15	PSA	FRASES BUSTOS 4	0.00
3/23/2022	03:40 PM	:30	PSA	FRASES BUSTOS 6	0.00
3/24/2022	03:40 PM	:15	PSA	FRASES BUSTOS 5	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

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

Invoice ID: 22030396
Invoice Date: 3/31/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/25/2022	09:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/26/2022	05:40 PM	:15	PSA	FRASES BUSTOS 1	0.00
3/27/2022	08:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/28/2022	10:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/29/2022	06:40 PM	:15	PSA	FRASES BUSTOS 2	0.00
3/30/2022	07:40 AM	:30	PSA	FRASES BUSTOS 6	0.00
3/31/2022	05:40 PM	:15	PSA	FRASES BUSTOS 3	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: 22030390
 Invoice Date: 3/31/2022
 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

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/2/2022	08:40 AM	:60	PSA	CNVE0966000	0.00
3/2/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
3/4/2022	01:40 PM	:30	PSA	CNVE0964000	0.00
3/4/2022	04:40 PM	:60	PSA	CNVE0966000	0.00
3/6/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
3/6/2022	12:40 PM	:60	PSA	CNVE0966000	0.00
3/7/2022	07:40 AM	:30	PSA	CNVE0964000	0.00
3/7/2022	08:40 AM	:60	PSA	CNVE0966000	0.00
3/9/2022	02:40 PM	:60	PSA	CNVE0966000	0.00
3/9/2022	05:40 PM	:30	PSA	CNVE0964000	0.00
3/11/2022	07:40 AM	:30	PSA	CNVE0964000	0.00
3/11/2022	04:40 PM	:60	PSA	CNVE0966000	0.00
3/13/2022	07:40 AM	:60	PSA	CNVE0966000	0.00
3/13/2022	03:40 PM	:30	PSA	CNVE0964000	0.00
3/14/2022	06:40 AM	:30	PSA	CNVE0964000	0.00
3/14/2022	09:40 AM	:60	PSA	CNVE0966000	0.00
3/16/2022	02:40 PM	:30	PSA	CNVE0964000	0.00
3/16/2022	07:40 PM	:60	PSA	CNVE0966000	0.00
3/18/2022	08:40 AM	:60	PSA	CNVE0966000	0.00
3/18/2022	12:40 PM	:30	PSA	CNVE0964000	0.00
3/20/2022	10:40 AM	:60	PSA	CNVE0966000	0.00
3/20/2022	12:40 PM	:30	PSA	CNVE0964000	0.00
3/21/2022	10:40 AM	:30	PSA	CNVE0964000	0.00
3/21/2022	06:40 PM	:60	PSA	CNVE0966000	0.00
24 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

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

KWBY 940 AM Invoice

Invoice ID: 22030383
 Invoice Date: 3/31/2022
 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

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

Sponsor: PSA- S
PSA- S

Invoice ID: 22030383
Invoice Date: 3/31/2022

Page 2

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/13/2022	10:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/13/2022	11:40 AM	:30	PSA	VYSJ0475000H	0.00
3/13/2022	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/14/2022	07:40 AM	:30	PSA	1SSA0044000	0.00
3/14/2022	10:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
3/14/2022	02:40 PM	:30	PSA	SARM0240000	0.00
3/15/2022	08:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/15/2022	09:40 AM	:30	PSA	CNFE0357000	0.00
3/15/2022	12:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/16/2022	06:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
3/16/2022	12:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/16/2022	06:40 PM	:30	PSA	VYSJ0475000H	0.00
3/17/2022	07:40 AM	:30	PSA	SARM0240000	0.00
3/17/2022	10:40 AM	:30	PSA	CNFE0357000	0.00
3/17/2022	05:40 PM	:30	PSA	1SSA0044000	0.00
3/18/2022	06:40 AM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/18/2022	09:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/18/2022	03:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/19/2022	11:40 AM	:30	PSA	SARM0240000	0.00
3/19/2022	12:40 PM	:30	PSA	VYSJ0475000H	0.00
3/19/2022	04:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
3/20/2022	07:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/20/2022	11:40 AM	:30	PSA	1SSA0044000	0.00
3/20/2022	01:40 PM	:30	PSA	CNFE0357000	0.00
3/21/2022	12:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/21/2022	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/21/2022	06:20 PM	:30	PSA	VYSJ0475000H	0.00
3/22/2022	08:40 AM	:30	PSA	SARM0240000	0.00
3/22/2022	02:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
3/22/2022	07:40 PM	:30	PSA	1SSA0044000	0.00
3/23/2022	10:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/23/2022	12:40 PM	:30	PSA	CNFE0357000	0.00
3/23/2022	01:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/24/2022	06:40 AM	:30	PSA	VYSJ0475000H	0.00
3/24/2022	09:40 AM	:30	PSA	DISTRACTED DRIVING	0.00
3/24/2022	01:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/25/2022	06:40 AM	:30	PSA	CNFE0357000	0.00
3/25/2022	08:40 AM	:30	PSA	SARM0240000	0.00
3/25/2022	05:40 PM	:30	PSA	1SSA0044000	0.00
3/26/2022	07:40 AM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/26/2022	09:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/26/2022	12:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/27/2022	08:40 AM	:30	PSA	SARM0240000	0.00
3/27/2022	12:40 PM	:30	PSA	VYSJ0475000H	0.00
3/27/2022	01:40 PM	:30	PSA	DISTRACTED DRIVING	0.00
3/28/2022	08:40 AM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/28/2022	10:40 AM	:30	PSA	1SSA0044000	0.00
3/28/2022	06:40 PM	:30	PSA	CNFE0357000	0.00
3/29/2022	06:40 AM	:30	PSA	VYSJ0475000H	0.00
3/29/2022	02:40 PM	:30	PSA	CNAL0022000 ALZHEIMER'S AWA	0.00
3/29/2022	02:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/30/2022	07:40 AM	:30	PSA	DISTRACTED DRIVING	0.00

Continued

KWBY 940 AM Invoice

Sponsor: PSA- S
PSA- S

Invoice ID: 22030383
Invoice Date: 3/31/2022

Page 3

Date	Time	Length	Description	CopyID / ISCI Code	Cost
3/30/2022	08:40 AM	:30	PSA	1SSA0044000	0.00
3/30/2022	11:40 AM	:30	PSA	SARM0240000	0.00
3/31/2022	04:40 PM	:30	PSA	CNAT0532000 AUTISM AWARENE	0.00
3/31/2022	06:40 PM	:30	PSA	7CRO0092000 DONACION DE OR	0.00
3/31/2022	07:40 PM	:30	PSA	CNFE0357000	0.00
93 Total Items				Total Cost:	0.00

Amount Due: 0.00