Sales Order

Sta	Station: KKQQ-FM								E	Buye	er:	$\smile v$						
Contract Name: 2022 CITY ELECTION DORAN KC								Buyer: Tax Schedule:										
Contract#: 173972 (none																		
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			NA DORAI															***************************************
			≀ Main Ave									J		,				
			ngs															
			CITY ELEC							•								
CO	mpetitive	Code: Po	iiticai							-								
	DATES Alt TIMES DIS								CTDI	TRIBUTION TOTALS								
No	START		Alt TII wks START	END	LEN	М	Т	W	T			_	Per Wk	D/W	RATE	SPOTS	\$\$	PTY
1	3/28/22	4/01/22	6:00 AM	7:00 PM	30	3		3		3			9	D	0.00	9	0.00	
2	4/04/22	4/11/22	6:00 AM	7:00 PM	30	4	4	4	4	4			20	D	0,00	24	0.00	
3	4/12/22	4/12/22	6:00 AM	12:00 PM	30		2						2	D	0.00	_2	0.00	
No	D/	ATES		INVENTORY				OF				RDER		QTY		PRICING		TE TOTAL
140	START	END		TYPE								BY				TURE	RATE	
1	3/21/22	3/21/22	POLITICAL	PACKAGE				No	on S	pot ł	tem				1 P	er Item	\$420.00	\$420.00
Day	part: M-S	: Political S I2:00 AM-1 ons: By Mo	2:00 AM															
		-	Mar 22	Apr 22														
		CA	420.00	0.00														
		ST	420.00	0.00														
	Print Sp	ot Prices										TO	TAL SP	OTS				35
	• • • • • • • • • • • • • • • • • • • •																	
												AL ⁻	TERNA	TIVE	REVEN	UE TOT	AL \$	420.00
									<i>.</i> .			GR	oss to	OTAL	\$			420.00
						. .												
									ADJUSTED TOTAL \$						400.00			
		·-·																
												ΑPI	PROVE	DE	CLINE			
												\bigcirc)	\subset)	General	Manager	
)	\subset) ;	Sales M	anager	
))	Busines	s Manager	
)		,	Traffic D	irector	

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See Invoice for actual schedule and charges, hereby request station time as follows:						
IDENTIFY CANDIDATE TYPE	ERAL CANDIDATE E OR LOCAL CANDIDATE						
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED						
Candidate name: Brianna Diven							
Authorized committee:							
Agency requesting time (and contact information):							
Candidate's political party: NQ							
Office sought (no acronyms or abbreviations): Srovangs City Wunce	il						
Date of election: 4/12/22	General Primary						
Treasurer of candidate's authorized committee:							
The undersigned represents that:							
(1) the payment for the broadcast time requested has been fur							
the candidate listed above who is a legally qualified candidate, or							
the authorized committee of the legally qualified candidate listed above;							
(2) this station is authorized to announce the time as paid for by such person or entity; and							
(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices (not applicable to federal candidates).							
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.							
Candidate/Committee/Agency	Station Representative						
Signature:	Signature:						
Name: Brianna Doran	Name: Cliniflwlr						
Date of Request to Purchase Ad Time: 3/29/22	Date of Station Agreement to Sell Time:						

Federal Candidate Certification: The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer to an opposing candidate or, if it does, (2) contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds and a simultaneously displayed printed statement identifying the candidate, that the candidate approved the broadcast and that the candidate and/or the candidate's authorized committee paid for the broadcast or if radio programming, contains a personal audio statement by the candidate that identifies the candidate, the office being sought and that the candidate has approved the broadcast.									
Candidate/Authorized Committee/Agency									
Signature:									
Name:									
Date:									
TO BE COMPLETED BY STATION ONLY									
Ad submitted to Station? Yes No Date ad received: 316122									
Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).									
Federal candidate certification signed (above): Yes No No									
Disposition:									
Accepted									
Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*									
Rejected – provide reason:									
*Hoload partially assessed for the latest and the l									
*Upload partially accepted form, then promptly upload updated final form when complete.									
Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):									
Contract #: 123 9 72 Station Call Letters: Date Received/Requested:									
Est. #: Station Location: Run Start and End Dates: 17172									
Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPIF or use this space to document schedule of time purchased, when spots actually aired, the rates charged and the classes of time purchased or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPIF.									
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