

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ **FEDERAL CANDIDATE**

☒ **STATE/LOCAL CANDIDATE**

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

**Station and Location:**

**Date:**

I, Neil Williams

being/on behalf of: Michelle Smith

a legally qualified candidate of the Republican

political party for the office of: IL SD49

in the General

election to be held on: 11/8/16

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

**Attach proposed schedule with charges (if available):**

I represent that the payment for the above described broadcast time has been furnished by:

Citizens to Elect Michelle Smith for Senate and RSSCC

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Greg Nichols

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

***To Be Signed By Candidate or Authorized Committee***

<div></div>	<div></div>
<b>Date</b>	<b>Signature</b>

***To Be Signed By Station Representative***

☐ Accepted

☐ Accepted in Part

☐ Rejected

<div></div>	<div></div>	<div></div>
<b>Signature</b>	<b>Printed Name</b>	<b>Title</b>

## FEDERAL CANDIDATE CERTIFICATION

**In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:**

I, **Neil Williams**

(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

☐ does

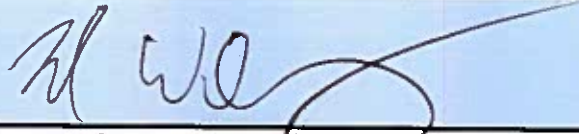
☐ does not

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

☐ the **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.

☒ the **television** programming 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.



signature of candidate or authorized committee

**Neil Williams**

printed name

date