

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: <i>KPET-AM KC</i>	Date: <i>11/1/16</i>
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I, *[Signature]* **Communicator**
do hereby request station time concerning the following issue: *OMLP*

The Democratic National Committee

Broadcast Station	Time of Day or Portion of Package	Days	Class	Times per Week	Number of Weeks
SEE ATTACHED SCHEDULE					<i>396</i>

This broadcast time will be used by: *The Democratic National Committee*

**THIS PAGE MUST BE COMPLETED FOR PROGRAMMING THAT
"COMMUNICATES A POLITICAL MATTER OF NATIONAL IMPORTANCE."
FOR ALL OTHER ISSUE ADS, PLEASE GO TO PAGE 3.**

Programming that "communicates a political matter of national importance" includes (1) references to legally qualified candidates (presidential, vice presidential or congressional); (2) any election to Federal office (e.g., any references to "our next senator", "our person in Washington" or "the President"); and (3) a national legislative issue of public importance (e.g., Affordable Care Act, revising the IRS tax code, federal gun control or any federal legislation).

Does the programming in whole or in part communicate a message relating to any political matter of national importance?

Yes No

For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the offices being sought, the date(s) of the election(s) and/or the issue to which the communication refers (if applicable):

[Redacted area]

I represent that the payment for the above described broadcast time has been furnished by (name and address):

[Redacted area]

and you are authorized to announce the time as paid for by such person or entity (hereinafter referred to as the "sponsor").

List the chief executive officers or members of the executive committee or the board of directors below (or attach separately):

[Redacted area]

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 5)

**THIS PAGE MUST BE COMPLETED FOR PROGRAMMING THAT
DOES NOT "COMMUNICATE A POLITICAL MATTER OF NATIONAL
IMPORTANCE"**

I represent that the payment for the above described broadcast time has been furnished
by (name and address):

[REDACTED]

and you are authorized to announce the time as paid for by such person or entity
(hereinafter referred to as the "sponsor").

List the chief executive officers or members of the executive committee or the board of
directors below (or attach separately):

[REDACTED]

TO BE COMPLETED FOR ALL ISSUE ADVERTISEMENTS

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The Sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), the sponsor also agrees to prepare a script, transcript, or tape, which will be delivered to the station at least 24 hours before the time of the scheduled broadcasts.

TO BE SIGNED BY ISSUE ADVERTISER (SPONSOR)

1/18/13 [Signature] 618-247-9000
Date Signature Contact Phone Number

TO BE SIGNED BY STATION REPRESENTATIVE

Accepted Accepted in Part Rejected
[Signature] CRISTA COLLINS NSM
Signature Printed Name Title

Sales Order

Station: **KPRT-AM** Contract#: **0** Agency: **KATZ MEDIA GROUP**
 Contract Name: **Democratic Ntl Com KPRT** Address: **125 WEST 55TH STREET, 3RD FLOOR**
 Proposal#: **F2EB11EE-7630-4E44-B34A-C9B271AB16D1** City: **NEW YORK** State: **NY** Zip: **10019**
 Phone: **(212) 424-6400**
 Start Date: **11/02/16** End Date: **11/04/16** Buyer: _____
 Revenue Type: **Political/National** Type: **Cash** Tax Schedule: **(None)**
 Advertiser: **DEMOCRATIC NAT'L COMMITTEE** Agency Commission %: **15**
 Address: _____ Billing Cycle: **Standard**
 City: _____ State: _____ Zip: _____ Salesperson: **1996PKATZ** Comm %: **12**
 Phone: **(314) 421-4040** Makegood Policy: **Within Contract Dates**
 Product Name: **Issue**
 Estimate #: **na**
 Agency Client Code: **DNC**
 Competitive Code: **POLITICAL ISSUE**

No	DATES		Alt	TIMES		LEN	DISTRIBUTION							RATE	TOTALS		PTY		
	START	END		wks	START		END	M	T	W	T	F	SA		SU	Per Wk		DAW	SPOTS
1	11/02/16	11/04/16		6:00 AM	7:00 PM	60			X	X	X			6	W	66.00	6	396.00	

Billing Projections: By Month

	Nov 16
CA	396.00
ST	396.00

Print Spot Prices

TOTAL SPOTS **6**
 GROSS TOTAL \$ **396.00**
 ADJUSTED SPOTS **6**
 ADJUSTED TOTAL \$ **396.00**

APPROVE DECLINE

- General Sales Manager/Interactive
- Business Manager
- Non Use
- Added Value Manager