



BROADCAST CONTRACT

CONTRACT # 3758-40/41/42

NEW WEST BROADCASTING CORPORATION
1145 KILAUEA AVENUE HILO, HAWAII 96720 (808) 935-5461 FAX (808) 935-7761

DATE: March 27, 2024

ADVERTISER: FRIENDS FOR DENNIS ONISHI
AGENCY:
CONTACT: DENNIS ONISHI
PHONE: (808) 443-9282
FAX:
ADDRESS: PO BOX 5240
CITY: HILO
STATE: HI ZIP CODE: 96720
EMAIL ADDRESS: fresh19@msn.com
ACCOUNT EXECUTIVE: KATHY LEONARD
PRODUCT: PRIMARY 2024
CATEGORY: POLITICAL/COUNCIL D3
START DATE: 4/8/2024
END DATE: 5/17/24
TOTAL WEEKS: 6
TOTAL COMMERCIALS: 270
KWXX X KAQY B97 X B93 KPUA X

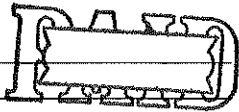
BILLING INSTRUCTIONS

BROADCAST X CALENDAR COOP

Table with columns: STATION, FLIGHT DATES, DAYPART, LENGTH, MON, TUE, WED, THU, FRI, SAT, SUN, SPOT COUNT, RATE, TOTAL. Rows include KWXX FM and KNWB FM spots.

TOTAL 270 \$3,870.00

SPECIAL INSTRUCTIONS



TAX \$182.35

TOTAL \$4,052.35

APPROVAL

ACCOUNT EXECUTIVE

CLIENT

ACCEPTED FOR NEW WEST BROADCASTING CORPORATION

TITLE DATE

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

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.

I, Dennis M. Onishi, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

- FEDERAL CANDIDATE
 STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: <u>Dennis M. Onishi</u>	
Authorized committee: <u>Friends for Dennis Onishi</u>	
Agency requesting time (and contact information): <input checked="" type="checkbox"/> N/A	
Candidate's political party: <u>Non Partisan</u>	
Office sought (no acronyms or abbreviations): <u>Hawaii County Council District 3</u>	
Date of election: <u>8/10/24</u> <input type="checkbox"/> General <input checked="" type="checkbox"/> Primary	
Treasurer of candidate's authorized committee: <u>Sharon Iwata</u>	
<p>The undersigned represents that:</p> <p>(1) the payment for the broadcast time requested has been furnished by (check one box below):</p> <p><input checked="" type="checkbox"/> the candidate listed above who is a legally qualified candidate, or</p> <p><input type="checkbox"/> the authorized committee of the legally qualified candidate listed above;</p> <p>(2) this station is authorized to announce the time as paid for by such person or entity; and</p> <p>(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices.</p> <p>THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.</p>	
Candidate/Committee/Agency	Station Representative
Signature:	Signature:
Name: <u>Dennis M. Onishi</u>	Name: <u>Kathleen Leonard</u>
Date of Request to Purchase Ad Time: <u>3/27/24</u>	Date of Station Agreement to Sell Time: <u>3/27/24</u>

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:

N/A

Name:

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No

Date ad received: 3/27/24

Federal candidate certification signed (above): Yes No N/A

Disposition:

- Accepted
- Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*
- Rejected – provide reason (optional):

*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 #: <i>3758 - 40/4/42</i>	Station Call Letters: <i>KWXX FM, KWB FM, KPJA AM</i>	Date Received/Requested: <i>3/27/24</i>
Est. #: <i>N/A</i>	Station Location: <i>Hilo HI</i>	Run Start and End Dates: <i>4/8 - 5/17/24</i>

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.