

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Breeani Kobayashi, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Breeani Kobayashi

Authorized committee: Friends Of Bree

Agency requesting time (and contact information):

N/A

Candidate's political party: NA

Office sought (no acronyms or abbreviations): Mayor-County Of Hawaii

Date of election: August 10, 2024

General

Primary

Treasurer of candidate's authorized committee: Kim Kimi

The undersigned represents that:

(1) the payment for the broadcast time requested has been furnished by (check one box below):

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: <u>Breeani Kobayashi</u> <small>Breeani Kobayashi (May 29, 2024 11:04 HST)</small>	Signature: <u>Chris S. Leonard</u>
Name: <u>Breeani Kobayashi</u>	Name: <u>Christopher S. Leonard</u>
Date of Request to Purchase Ad Time: <u>05/29/2024</u>	Date of Station Agreement to Sell Time: <u>5/29/24</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: 5/29/24

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 N/A

Disposition:

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

*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 #: 5915-2/3/4/5	Station Call Letters: KWHX FM, KAOY FM KWB FM, KWB FM	Date Received/Requested: 5/29/24
Est. #: N/A	Station Location: H10 H1 Kailua-Kona, HI	Run Start and End Dates: 5/30/24 - 6/19/24

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.



BROADCAST CONTRACT

CONTRACT # 5915-2/3 4/5

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

DATE: May 28, 2024

ADVERTISER Friends Of Bree AGENCY _____
 CONTACT Breeani Kobayashi PHONE _____ FAX _____
 ADDRESS PO Box 120 CITY Hilo
 STATE HI ZIP CODE 96721 EMAIL ADDRESS campaign@breeformayor.com
 ACCOUNT EXECUTIVE Billy Kervick PRODUCT Mayoral Candidate CATEGORY Political
 START DATE 5/30/24 END DATE 6/19/24
 TOTAL WEEKS 3 TOTAL COMMERCIALS 246
 KWXX X KAQY X B97 X B93 X KPUA _____

BILLING INSTRUCTIONS BROADCAST X CALENDAR COOP

STATION	FLIGHT DATES	DAYPART	LENGTH	MON	TUE	WED	THU	FRI	SAT	SUN	SPOT COUNT	RATE	TOTAL
KWXX (94.7 HILO)	5/30-6/19/24	6a-10a	:60	3	3	3	3	3			45	\$ 17.50	\$ 787.50
KWXX (94.7 HILO)	6/1-6/16/24	10a-3p	:60						3	3	18	\$ 15.00	\$ 270.00
KAQY (101.5 KONA)	5/30-6/19/24	6a-10a	:60	3	3	3	3	3			45	\$ 17.50	\$ 787.50
KAQY (101.5 KONA)	6/1-6/16/24	10a-3p	:60						3	3	18	\$ 15.00	\$ 270.00
KNWB (97.1 HILO)	5/30-6/19/24	6a-10a	:60	3	3	3	3	3			45	\$ 17.50	\$ 787.50
KNWB (97.1 HILO)	6/1-6/16/24	10a-3p	:60						3	3	18	\$ 15.00	\$ 270.00
KMWB (93.1 KONA)	5/30-6/19/24	6a-10a	:60	3	3	3	3	3			45	\$ 17.50	\$ 787.50
KMWB (93.1 KONA)	6/1-6/16/24	10a-3p	:60						3	3	18	\$ 15.00	\$ 270.00

TOTAL	252	\$4,230.00
TAX		\$199.32
TOTAL		\$4,429.32

SPECIAL INSTRUCTIONS

APPROVAL

Billy Kervick
 ACCOUNT EXECUTIVE
 Billy Kervick (May 29, 2024 11:33 HST)

Breeani Kobayashi
 CLIENT
 Breeani Kobayashi (May 29, 2024 11:04 HST)
 May 29, 2024

ACCEPTED FOR NEW WEST BROADCASTING CORPORATION

TITLE DATE

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