ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

	¥	Jane Thompson hereby request station time as follows: See Order for proposed													
	-	schedule and charges. See Invoice for actual schedule and charges.													
	Check one:														
	Ad "communicates a message relating to any political matter of national importance" by referring to (1) a legally qualified candidate for federal office; (2) an election to federal office; (3) a national legislative issue of public importance (e.g., health care legislation, IRS tax code, etc.); or (4) a political issue that is the subject of controversy or discussion at the national level.														
	Ad does NOT communicate a message relating to any political matter of national importance (e.g., relates only to a state or local issue).														
		ALL QUESTIONS/BLOCKS MUST BE COMPLETED													
	Sta	itation time requested by:													
×	Ag	gency name: Macon County Republican Central Committee													
c	Ad	Address: 1103 E Briggs Dr, Macon, MO 63552													
¥.	Ço	Contact: Jane Thompson Phone number: 660-651-6280													
	Na	Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission (for federal committees) with no acronyms; name must match the sponsorship ID in ad):													
	Na	Name: Macon County Republican Central Committee													
	Ad	Address: 1103 F Briggs Dr. Macon, MO 63552													
	Contact: Jane Thompson Phone number: 660-651-6280 Email: Jane 50@cv														
	Sta	Station is authorized to announce the time as paid for by such person o	or entity.												
×	List	List ALL of the chief executive officers or members of the executive committee or board of directors or other goveming group(s) of the advertiser/sponsor (Use separate page if necessary.):													
		Dean Vansickle, Krista Bruno, Craig Fuller, Jane Thomps	on												
ĵ	By exe	By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).													
	lf a	If ad refers to a federal candidate(s) or federal election, list ALL of the following:													
	Na	Name(s) of every candidate referred to: Office(s) sought by such candidate(s) (no acronyms or abbreviations):													
	Of														
	Da	Date of election:	-N/A												
	Clearly identify EVERY political matter of national importance referred to in the ad (no acronyms); use separate page if necessary:														

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.												
The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.												
Advertiser/Sponsor	Station	Station Representative										
Signature: June American	Signatur	Signature:										
Name: Jane Thompson	Name:	Name:										
	5/2024 Date of :	Date of Station Agreement to Sell Time:										
TO BE COMPLETED BY STATION ONLY												
Ad submitted to station?	No Date ad	received: 3/14/24										
Note: Must have separate PB-19 forms (or the equivalen	t, e.g., addendums) for ea	ach version of the ad (i.e., for every ad with differing copy).										
If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.												
Disposition:												
Accepted												
Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason (optional):												
Kejected – provide reason (options).												
*Upload partially accepted form, then promptly upload updated final form when complete.												
Date and nature of follow-ups, if any:												
Contract #: 44695 Station	Call Letters: KREC	Date Received/Requested:										
Est. #: Station	Location: OBERLY MO	Run Start and End Dates: 3/15/24-3/21/24										
For national issue ads only (not required for s	tate/local issue ads):											
Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.												

Sales Order

Station: KRES-FM Contract Name: MaconCoRepubCentComm2024										E	Tax Schedule: (None)										
0																					
Start Date: 3/15/24 End Date: 3/21/24																					
Revenue Type: Local Direct Type: Cash																					
**************************************									good P												
				Thomps										•	•		******				
				iggs																	
City		IVIACUI			Olale. ivi	Zip:															
D	lust Nam					Zip.		•		Ų.	99	-									
	duct Nan																				
Con	petitive	Code: S	ale	Barn		•		1													
			Lau	~~	150						ICT	RIBUT	TION		_	1	тс	TALS			
No	START	TES END	Alt wks	START	IES END	LEN	м	Т	W	T			SU	Per Wk	D/W	RATE	SPOTS	\$\$	PTY		
1	3/15/24	3/15/24		6:00 AM	7:00 PM	30					4			4	D	22.00	4	88.00	3		
					7.00 514	- 00	-	-	-		-			19	D	Non-Cand 22.00	didate Issue	418,00	3		
2	3/18/24	3/21/24		6:00 AM	7:00 PM	30	5	5	5	4	_			19	U		didate Politic				
No		ATES			INVENTO							DER	RQTY			PRICING RATE		TOTAL			
	3/15/24			NON-SPOT	TYPE		_		_	lon S	_	BY t Item		STRUCTURE \$				\$0.0	10	\$0.00	
Line Day	Remark: part: M-S	e: Local D Non-Cand 12:00 AM ions: By N	didate -12:0 /lonth		sue																
		CA		506.00																	
		ST		506.00																	
	Print Sp	oot Prices	S										TOTAL SPOTS 23								
														SPOT	TOTA	\L \$				506.00	
											ALTERNATIVE REVENUE TOTAL \$							0.00			
											GROSS TOTAL \$							506.00			
										ADJUSTED SPOTS							23				
		**														TOTAL	\$			506.00	
					riibi l									ADOOC	,,,,,	TOTAL				*******	
														ADDDO	WE	DECLIN	ıc				
														AFFIC	7 V L	OEOLIN		al Massas			
														\bigcirc		\bigcirc		al Manag	CI .		
														\bigcirc		\bigcirc		Manager			
														\bigcirc			Nation	nal Sales I	Manager		

Local Sales Manager

^{*} Sent to the traffic system by 1998sros, 03/14/24 @11:59,