

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: WBRT Bardstown, Ky	Date: 10/16/18
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I, Kelly Polliam

being/on behalf of: _____

a legally qualified candidate of the Rep

political party for the office of: Nelson county Clerk

in the NOV Gen Election

election to be held on: NOV 6, 2018

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
<u>See attached</u>					

Attach proposed schedule with charges (if available): \$240⁰⁰

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

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:

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

10/16/18 Date William Kelly Pulliam Signature

To Be Signed By Station Representative

Accepted Accepted in Part Rejected
Signature Printed Name Title

MBRT
106 S 3RD ST
BARTSTOWN, KY 40004
502-348-3943

Merchant ID: 000000502344 Ref #: 0001

Sale

XXXXXXXXXXXX0094 Exp: 11/21
VISA Entry Method: Suiped
Total: \$ 420.00
10/16/18 11:19:04
Inv #: 000258 Appr Code: 316276
Apprvd: Online Batch#: 000320

I agree to pay above total amount according to card issuer agreement (Merchant agreement if credit voucher)

William Kelly Pulliam
PULLIAM, WILIAM K

Merchant Copy
THANK YOU COME AGAIN

WBRT

0615

Advertising Order /

Date 10-17-10

WOKH

Production Request /

Client Code 4

Traffic Instructions

Sales Rep Code RS

Client Name KELLY PULLIAM POI

Address (confidential)

City _____ State _____ Zip _____

Contact _____ Telephone Number _____

Confirmation Needed Yes No Fax Number _____

Scheduled Start Date 10/30/10 Scheduled End Date 11/6/10

Daypart Schedule 7-8A / 10A-2P / 4-6P

WK M T W T F S Su Weekly Totals

WK	M	T	W	T	F	S	Su	Weekly Totals
10/29		1/2/0	1/2/1	1/2/1	1/2/1	3	2	2
11/5	1/2/1	1/1/0						6A-12A 7A-10A

Total ~~21~~ 5 X ~~44~~ 110 = Total Order \$ Value 240.00

New Order Copy Change

Copy #1 Title Nelson Co. Clerk Length 60

System # 0415 Start Date _____ End Date _____

Copy #2 Title _____ Length _____

System # _____ Start Date _____ End Date _____

#1 _____

21 @ \$10.00 (WK DAYS)

5 @ \$6.00 (WK ENDS)

#2 _____

Client Signature Pol - gnr Date _____

Sales Rep Signature Roth Date _____