# AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check	app	licable	e box
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☐ 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:			Date:	Date:	
KSTP, Minneapolis/St. Paul (added by station 7/22/22)			7/22/2	2	
I, GMMB	4				,
being/on bel	nalf of: Tim W	/alz			
a legally qua	lified candidate	of the Den	nocratic		
political part	ty for the office of	Govern	nor		
in the Gen	eral				
election to b	e held on: 11/8	3/22			
	equest station tin		<b>S</b> :		
Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
	AS ORDERED				

Attach proposed schedule with charges (if available):

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

### Tim Walz for Governor

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:

### Shelli Hesselroth

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.

### FEDERAL CANDIDATE CERTIFICATION

In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:

### GMMB on behalf of Tim Walz (name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement: □ does does not refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate: (check applicable box) the 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. the television programming 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. signature of candidate or authorized committee 6/8/22 M. TOHNSON date printed name

### AGREED UPON SCHEDULE

## (TO BE FILLED IN ONLY IF STATION DOES NOT ACCEPT ALL OF CANDIDATE'S REQUEST)

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
	AS ORDERED			natarana	
				71.9	

Attach proposed schedule with charges (if available):

#### AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

- 1) actual air time and charges for each spot;
- 2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- 3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

Note: Because the FCC requires that the political file contain the actual times the spots air and the rates charged, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired and the rates charged. The FCC's online political files include a folder for "Terms and Disclosures." NAB suggests that, for stations subject to the online public file rule, the names of contact person(s) be placed in that folder.

Added by Station 6/20/22 Buyer Info:

Maura Johnson maura.johnson@gmmb.com 3050 K Street, NW Suite 100 Washington, DC 20007

### **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/A	Agency Section completed on page 3 (Ad	dded by station 6/20/22)			
Signature:					
Name:					
Date:					
TO BE COMPLETED BY STATION ONLY					
Ad submitted to Station? Yes  Note: Must have separate PB-19 Form	No Date ad received:	every ad with differing copy).			
Federal candidate certification signed (ab	ove): Yes No	N/A			
Disposition:  Accepted  Accepted IN PART (e.g., ad copy  Rejected – provide reason:	not yet received to determine sponsor ID)	*			
*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 #:	Station Call Letters:	Date Received/Requested:			
Est. #:	Station Location:	Run Start and End Dates:			
use this space to document schedule of t purchased or attach separately. If station	affic system print-out) or other documents ime purchased, when spots actually aired, will not upload the actual times spots aired information immediately should be placed	the rates charged and the classes of time duntil an invoice is generated, the name			

the OPIF.