



TALLEY BROADCASTING CORP  
ID# 37-0904325

Please Remit To: P.O. Box 10  
Litchfield, IL 62056

Phone: 217-324-5921; 217-532-2066;  
217-854-2312 FAX: 217-532-2431

**Contract Confirmation** ..... WSMI-FM

Page: 1  
Date: 2/28/24

Account Name: FRIENDS OF AARON BELLM  
Contract Number: 2917201  
Revision Number: Orig

FRIENDS OF AARON BELLM  
PO BOX 407  
CARLINVILLE, IL 62626

	Date Range	Dayparting	Len	Rate	Mon	Tue	Wed	Thu	Fri	Sat	Sun	WeeksOn	WkUnit	TotlUnit	TotalAmt
A	3/01/24- 3/01/24	7:00a- 8:30a	60s	\$62.00/spt					1	-	-	All	1	1	\$62.00
A	3/04/24- 3/15/24	7:00a- 8:30a	60s	\$62.00/spt	1	1	1	1	1	-	-	All	5	10	\$620.00
A	3/18/24- 3/19/24	7:00a- 8:30a	60s	\$62.00/spt	1	1						All	2	2	\$124.00

CONTRACT TOTAL: \$806.00 13 Units

Month	Units	Total
Mar24	13	\$806.00

**Accepted By**

*Client Signature*

**Accepted By**

*Station Signature*

**Today's Date**

**Today's Date**

**CANDIDATE ADVERTISEMENT AGREEMENT FORM**

See Order for proposed schedule and charges. See brochure for actual schedule and charges. Adam Bellin hereby request station time as follows:

ENTRY CANDIDATE TYPE:  FEDERAL CANDIDATE  STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Adam E. Bellin  
 Authorized signature: Francis J. Adam Bellin  
 Agency requesting time (and contact information):  
 N/A  
 Republican  
 Candidate's political party:  
 Office (include the acronym or abbreviation):  
Resident Circuit Court Judge  
 Date of election: March 11, 2024  
 Treasurer of candidate's authorized committee:  
Bridget N. Bellin  
 Primary  General

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) the station is authorized to announce the time as paid for by such person or entity; and  
 (3) the station has decided its political advertising policies, including applicable classes and rates, discounts, promotion and other sales practices.  
**THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.**

Candidate/Committee/Agency: \_\_\_\_\_  
 Signature: Adam E. Bellin  
 Name: Adam E. Bellin  
 Date of Request to Purchase Ad Time: \_\_\_\_\_  
 Station Representative: \_\_\_\_\_  
 Signature: B. [unclear]  
 Name: BRIAN [unclear]  
 Date of Station Agreement to Sell Time: 2/28/24

**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:

Name:

Date:

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?  Yes  No

Date ad received: \_\_\_\_\_

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):

WAITING ON AD + PAYMENT

Contract #: 2917201	Station Call Letters: WSML AM/FM	Date Received/Requested: 2/28/24
Est. #:	Station Location: LITCHFIELD, IL	Run Start and End Dates: 3/1/24 - 3/19/24

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.