CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.				
1, Angra Heartsill	, hereby request station time as follows:			
IDENTIFY CANDIDATE TYPE	RAL CANDIDATE OR LOCAL CANDIDATE			
ALL QUESTIONS/BLOCKS	S MUST BE COMPLETED			
Candidate name:				
Bach Kniff McCulla Authorized committee:	ton 1.9 county and the first the county of t			
Back Kniff McCulla for Io.	va			
Agency requesting time (and contact information):				
N/A				
Candidate's political party:				
Republican				
Office sought (no acronyms or abbreviations):	,			
Towa House				
Date of election:	General Primary			
November 8,2022				
Treasurer of candidate's authorized committee:				
Angre Heartsill				
The undersigned represents that:				
(1) the payment for the broadcast time requested has been fur	nished 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, inc and other sales practices (not applicable to federal candidate				
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: x Angu AlauASM (Signature: Janus K Beitte			
Name: ANGUE USARTSUL	Name: James K. Bu Her			
Date of Request to Purchase Ad Time: $(0/39/3)$	Date of Station Agreement to Sell Time: 10/29/22			

to an opposing candidate or, if it does, (2 for a duration of at least four seconds and the candidate approved the broadcast ar	e broadcast matter to be aired pursuant to contains a clearly identifiable photograph d a simultaneously displayed printed stater nd that the candidate and/or the candidate ains a personal audio statement by the can didate has approved the broadcast.	n or similar image of the candidate ment identifying the candidate, that e's authorized committee paid for the			
Candidate/Authorized Committee/	Agency				
Signature: × GNGW HEASSIN					
Name: ANGUG HBAR	T 8111				
Date: x 10/28/22					
TO BE COMPLETED BY STATION ONLY					
Ad submitted to Station? Yes No Date ad received: 10/3/27					
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 (ab	oove): 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 pro	omptly upload updated final form when co	mplete.			
Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):					
Contract #:	Station Call Letters: バンム	Date Received/Requested:			
Est. #: <i>O/O//</i>	Station Location:	Run Start and End Dates:			
purchased or attach separately. If station of a contact person who can provide that	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.	reflecting this transaction to the OPIF or the rates charged and the classes of time d until an invoice is generated, the name d in the "Terms and Disclosures" folder in			
410					

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KRLS Invoice

Invoice ID: 22100277 Invoice Date: 10/31/2022 Account ID: 2605 Order ID: 2605-004

Account Rep: Jim Butler

Amount Due: \$703.50

Amount Paid:

BARB KNIFF MCCULLA FOR IOWA PELLA, IA 50219

LITICAL AD E	KNIFF MCCULLA FOR IOWA / Non-Broadca BUY			Page
	Date Description			Cos
	10/31/2022 POLITICAL AD BUY			703.50
	1 Total Items		Total Cost:	703.50
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