

CANDIDATE REQUEST FOR POLITICAL BROADCAST INFORMATION OR TIME

Date of Request: 1-28-16 Time of Request: _____

Candidate Name: John Brunner

Party: Republican

Candidate for: Governor MD
(Office) (Location)

Candidate's Authorized Committee: See NAB

Treasurer of Candidate's Authorized Committee: _____

Address: _____

Telephone: _____

Agency for Candidate (if any): _____

Name of Person Requesting Information/Time: _____

Information Requested: _____

- Rates for _____
- Availabilities for _____
- Other: _____

Disposition of Request:
 Accepted Rejected Accepted or Rejected in part (attach explanation)

Rate Charged for Spot: see order

Class of Time Purchased: ordered 2/1/16

Air Date and Time (attach a schedule of the advertising or program time provided, if necessary):
see attached

Rebate Paid (if any): NA

Disclosure Statement Provided by Station: Yes No Previously provided

BCRA Certificate (for Federal candidates only) Provided: Yes No Previously provided

Other Information: _____

Inquiry Received By: Craig Dreiling