

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: WUPN - SAULT Ste. MARIE, MI.	Date: 7-28-20
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I, KATHY TURNOY,
 being/on behalf of: KATHY TURNOY FOR MICHIGAN, a legally
 qualified candidate of the REPUBLICAN political
 party for the office of: STATE House of Rep.
 in the 107th DISTRICT
 election to be held on: AUGUST 4th, 2020
 do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
Please See ATTACHED Schedule					

Total Charges: \$ 250⁰⁰

For programming that, in whole or in part, "communicates a message relating to any political matter of national importance," list the matters below:

N/A

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

KATHY TURNER FOR MICHIGAN

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:

KATHY TURNER

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

7/28/20 [Signature]
Date Signature

To Be Signed By Station Representative

Accepted Accepted in Part Rejected

[Signature] TIM ELLIS OWNER
Signature Printed Name Title

CANDIDATE CERTIFICATION

In Order For Federal Candidates to Receive The Lowest Unit Charge During a Political Window, the Following Certification is Required:

I, KATHY TURNER
(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.

KATHY TURNER
signature of candidate or authorized committee

KATHY TURNER printed name 7/28/20 date

WUPN Eagle 95.1
 PO Box 1780
 Sault Ste. Marie, MI 49783
 906-723-9596

WUPN Order Confirmation

OrderID: 8052-002

Sponsor: TWARDY, KATHY
 Product: TWARDY, KATHY
 Estimate/PO: 2020 Primaries
 AccountRep: KATIE WOLLAN
 BillingCycle: Calendar Month
 InvoiceType: Detail Notarized Affidavit
 Run Dates: 7/28/2020 - 8/4/2020
 Items Ordered: 50
 Ordered Amount: \$250.00

THE COMMITTEE TO ELECT KATHY TWARDY
 305 ARMORY PLACE
 SAULT STE. MARIE, MI 49783

Scheduled Station(s): WUPN EAGLE 95.1 TWARDY, KATHY

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Run Dates	Run Weeks	Run Times	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Week Total	Length	Description	Avail Type	Copy ID	Qty	Item Cost	Total Cost
01 7/28/2020 - 8/4/2020	A-Weeks	05:00 AM - 07:00 PM	7	7	6	5	7	6	4	43	30	Spot		COM 2100	50	5.00	250.00
Calendar Month Projected Billing:																	
	Jul 29	130.00															
			Aug 29							120.00				0.00		Q3 2020	250.00

Guaranteed _____ Accepted for WUPN _____ Confirmed Correct, Payment