

New Order

Agency: American Media & Advocacy Group **Station:** WJAN-TV
Office: Alexandria **Order Type:** Normal
Client: 754 - Rick Scott for Florida **Cancel Date:**
Product: 1924 - 2024
Piggyback Product:
Estimate: 16347 - SL TV May 9 - 15 **Received in ePort:** 4/30/2024 11:23:22 AM

Flight Start: 05/09/2024
Flight End: 05/15/2024
Hiatus:

Airtime Dollars: \$2,000.00
Interactive Dollars: \$0.00
Non-Airtime Dollars: \$0.00
Total Dollars: \$2,000.00
Total Spots: 4

Primary Demo: A35+ **Local/National:** Local
Demo 2: **Rep Office:** WJAN-TV
Demo 3: **AE:** Toni Menicocci
GRP: 1.92 **Phone:**
CPP: \$1,041.67 **OrderID:** 13401841
GIMP: 0 **Status:** Confirm in Progress
CPM: \$0.00

MarketShare:

Comments: Separation: 30
 PopulationBuyType: CPP

Daily Airtime Lines

Line No	Daypart (Program)	DPT Code	Rate	C/T	Len	Spots							Total			
						5/9	5/10	5/11	5/12	5/13	5/14	5/15	Spots	Rtg	CPP	Imp
1	THFMTuW 7P-8P AN7	PT	\$500.00	C	30	1	1	0	0	1	0	1	4	0.48	\$1,041.67	
Hispanic NovDecJan - MIAMI-FT. LAUDERDALE						Total Spots: 1 1 0 0 1 0 1										
						Total GRP: 0.5 0.5 0.0 0.0 0.5 0.0 0.5										
						Cash\$ - Spots: \$2,000.00 - 4										
						Trade\$ - Spots: \$0.00 - 0										
						Total Cost: \$2,000.00										
						Total GRP - CPP: 1.9 - \$1,041.67										
						Total GIMP(000) - CPM: 0 - \$0.00										

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.
 I, American Media & Advocacy Group, hereby request station time as follows:

STATE OR LOCAL CANDIDATE
 FEDERAL CANDIDATE

IDENTIFY CANDIDATE TYPE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Rick Scott
 Authorized committee: Rick Scott for Florida
 Agency requesting time (and contact information): N/A American Media & Advocacy Group
 Candidate's political party: Republican
 Office sought (no acronyms or abbreviations): United States Senator from Florida
 Date of election: August 20, 2024
 Treasurer of candidate's authorized committee: Salvatore Purpura

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) 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, including applicable classes and rates, discount, promotion 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.

Name: Steve Sykes Signature: <i>Steve Sykes</i> Date of Request to Purchase Ad Time:	Name: <i>Steve Purpura</i> Signature: <i>[Signature]</i> Date of Station Agreement to Sell Time: <i>4/24/24</i>
Candidate/Committee/Agency	Station Representative

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'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:

Steve Syckes

Name: Steve Syckes

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No

Date ad received: _____

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 (above):

Yes No N/A

Disposition:

Accepted

Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*

Rejected – provide reason:

*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 #: <i>See attached</i>	Station Call Letters: <i>WJTV</i>	Date Received/Requested:
Est. #: <i>See attached</i>	Station Location: <i>Hoped Gardens, A 33018</i>	Run Start and End Dates: <i>See attached</i>

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 in 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.