

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: KAP5 Cape Girardeau Mo.	Date: 7/31/18
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I, Brandon Cooper
 being/on behalf of: Brandon Cooper, a legally
 qualified candidate of the Rep. political
 party for the office of: Division 3 Cape Girardeau Co. Assoc. Judge
 in the Primary
 election to be held on: August 7
 do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
		see	order		

Total Charges: \$ 607.62

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:

Brandon Cooper for Judge

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:

Jeff Buwe

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).

To Be Signed By Candidate or Authorized Committee

7/3/18 Date

[Signature] Signature

To Be Signed By Station Representative

[X] Accepted

[] Accepted in Part

[] Rejected

[Signature] Signature

Dawn E Jones Printed Name

Sales Assistant Title

100.7 KGMO P.O. Box 558
 KAPE AM/FM Cape Girardeau, MO 63702
 104.7 KREZ (573) 339-7000
 97.3 KYRX Fax (573) 651-4100
 96.5 WKIB
 KJXX AM/FM

97.9 KBXB P.O. Box 907
 KRHW AM/FM Sikeston, MO 63801
 107.1 KBHI (573) 471-2000
 _____ Fax (573) 471-8525

BROADCAST ORDER AGREEMENT

No 181316

ACCOUNT NUMBER _____
 CLIENT Brandon Cooper
 AGENCY _____
 ADDRESS _____

NEW CLIENT
 RENEWAL
 NATIONAL

ORDER DATE 7/31/18
 START DATE 7/31
 END DATE 8/7
 ESTIMATE # _____
 CO-OP PRODUCT _____

EMAIL _____
 TELEPHONE _____
 BUYER _____
 SALESPERSON _____

BROADCAST BILLING
 CALENDAR BILLING

SEND INVOICE TO: CLIENT RATES: GROSS ORDER TYPE: BILLING
 AGENCY NET SCHEDULE CLIENT NEEDS: COPY CONFIRMATION
 TIME SHEET/COOP

START DATE/ END DATE	TIME/CLASS	LENGTH	CART #	M	T	W	TH	F	SA	SU	TOTAL WEEKLY	RATE	COST	KGMO	KAPE	KREZ	KYRX	WKIB	KJXX	KBXB	KRHW	KBHI	
7/31-8/6	6A-7p	:30			5	5	5	6	5	5	37	14.82			X								
8/6-8/7	6A-7p	:30		5	5						10	14.82			X								

	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	100.7 KGMO	\$	KJXX AM/FM	\$
BROADCAST							KAPE AM/FM	\$ 607.62	97.9 KBXB	\$
CALENDAR							104.7 KREZ	\$	KRHW AM/FM	\$
	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	97.3 KYRX	\$	107.1 KBHI	\$
BROADCAST							96.5 WKIB	\$		\$
CALENDAR							GRAND TOTAL	\$ 607.62	GRAND TOTAL	\$

STATIONS: _____
 TOTAL COMMERCIALS PER STATION: _____
 COMMERCIALS PER STATION USED: _____
 COMMERCIALS PER STATION REMAINING AFTER THIS ORDER: _____

PACKAGE NAME: _____
 PACKAGE RATE: _____ COMBO SINGLE
 RATE BREAKDOWN: _____

Payable monthly upon receipt of invoice. In the event payment is not made within 30 days after billing remaining balance is subject to 1.5% finance charge monthly (18% per annum). Purchaser agrees to pay all collection and/or attorney fees required to collect amounts due. This contract is subject to all Federal, State and Municipal laws and regulations now in force, or which may be enacted in the future. By signature below advertiser agrees to all terms and conditions on both sides of this agreement. This station does not discriminate in the sale of advertising time, and will accept no advertising which is placed with an intent to discriminate on the basis of race, gender, or ethnicity. Advertiser hereby certifies that it is not buying broadcasting air time under this advertising sales contract for a discriminatory purpose, including but not limited to decisions not to place advertising on particular stations on the basis of race, gender, national origin, or ancestry.

WITNESS our hands and seals the day and date first above written.
 TO BE SUBMITTED FOR APPROVAL _____ ADVERTISER

BY: _____ ACCOUNT REPRESENTATIVE
 BY: _____ OFFICER
 RATE APPROVAL: _____ DATE: _____