

Order #840061: Laffitte/D../Laffitte/D../Alabama Se../

Date	Action	Line	Comment	By	Total \$	# Spots	Expected GR
07/21/22 11:55:05 AM	Processed		<async process>	Shevetta M	\$104.00	4	0.00
07/21/22 11:17:18 AM	Approved			Kathi Manl	\$104.00	4	0.00
07/21/22 11:17:15 AM	Approval Workflow		[Business Manager - Business Office Approval Needed Default]	Kathi Manl	\$104.00	4	0.00
07/21/22 11:08:55 AM	Approval Workflow		[Sales Manager - Ready Default]	Brenton Al	\$104.00	4	0.00
07/21/22 8:58:48 AM	Ready for approval		Ready for approval	Eula Patte	\$104.00	4	0.00
07/21/22 8:55:26 AM	New order created		<new order>	Eula Patte	\$0.00	0	0.00

[Sorted by: Date]

ORDER

Orders
Order / Rev: 840061
Alt Order #: _____
Product Desc: Alabama Secretary of State
Estimate: _____
Flight Dates: 07/23/22 - 07/23/22
Original Date / Rev: 07/21/22 / 07/21/22
Order Type: GENERAL

WHRP-FM
Primary AE: Eula Patterson
Sales Office: L-HSV
Sales Region: Local

Agency
Name: Laffitte/D/Secretary of State In House
Buying Contact: _____
Billing Contact: Pamela Laffitte
PO Box 82145
Mobile, AL 36689

Billing Type: Cash
Billing Calendar: Broadcast
Billing Cycle: EOM/EOC
Agency Commission: 15%

Advertiser
Name: Laffitte/D/Secretary of State-Agency
Demographic: A25-54
Product Codes: Candidates
Revenue Code 1: AGY-AVAIL
Revenue Code 2: POL-CAND
Revenue Code 3: POL-STATE
Priority: P-100

New Business End: _____
Advertiser External ID: _____
Agency External ID: _____
Unit Code: General
Order Separation: 00:15:00

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
06/27/22	07/23/22	4	\$104.00	\$88.40

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
July 2022	4	\$104.00	\$88.40	0.00
Totals	4	\$104.00	\$88.40	0.00

Account Executives

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Eula Patterson			Start Of Order - End Of Order	100%

Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	Spots	Amount
N 1	WHRP	07/23/22	07/23/22	Sa-Su Midday Sa-Su	CM	10a-3p	-----4-	1:00	4	\$26.00	P-50	0.00	NM	4	\$104.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		Week: 07/18/22	07/24/22	-----4-		4				\$26.00		0.00			
													Totals	4	\$104.00

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.
I, Pamela J. Laffitte, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE →

FEDERAL CANDIDATE
 STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOGS MUST BE COMPLETED

Candidate name:

Pamela J. Laffitte

Authorized committee:

The Committee to Elect Pamela J. Laffitte

Agency requesting time (and contact information):

N/A

Candidate's political party: **Democrat**

Office sought (no acronyms or abbreviations): **Secretary of State**

Date of election: **November 08, 2022**

General Primary

Treasurer of candidate's authorized committee: **Self**

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.

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: 

Signature: Eula Patterson

Name: **Pamela J. Laffitte**

Name: Eula Patterson

Date of Request to Purchase Ad Time: **30 Jun 2022**

Date of Station Agreement to Sell Time: 6-30-2022

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 and/or 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: _____
 Name: _____
 Date: _____

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No
 Date ad received: 6/30/2022
 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 (optional): _____

*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 #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPJF 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 until 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 OPJF.