NAB Form PB-17 Issues

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: WWIS RADIO BLACK RIVER FALLS WI					Date: 3/25/24	
BILL LAUF hereby reque	RENT Chairman est station time conc	erning the following	Wiles Party.	of Jackson (ounty	
support &	of seterendu,	ns on	The Apri	I Znd Bells		
Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks	
aH	ached		70 Y			
otal Charg	es: \$291	00	Yanesa	0.000000 We 912 32 OV	es anticopy and	
s broadcast tir	ne will be used by:_	The Repub	Vica Park	of Jackson	lounty	
es the pressage re	ogramming (in lating to any	n whole or political ma	in part) co	ommunicate tional impor	"a tance?"	

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For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):
For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)
I represent that the payment for the above described broadcast time has been furnished by:
nepublican Party of Jackson Chy
and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:
\square a corporation; \square a committee; \square an association; \square or other unincorporated group.
The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACMENT OF ADVERTISING.
I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least before the time of the scheduled broadcasts.
TO BE SIGNED BY ISSUE ADVERTISER
3/25/24 Lill Faut 715-896-3340 Date Signature Contact Phone Number
TO BE SIGNED BY STATION REPRESENTATIVE
Accepted
Signature Printed Name Title
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AGREED UPON SCHEDULE

For All Issue Advertisements That Communicate a Message Relating to Any Political Matter of National Importance

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

Total Charges: 29100

AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

- (1) actual air time and charges for each spot;
- (2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- (3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

Note: Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.

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For Jackson County Republican Party

1 Buyline and 2 ROS today thru Thursday April 2, taking out Sunday, Saturday will be a 7am News Sponsor....that should be \$291.00

Payments Report

WWIS FM-WWIS AM-REPAIRED for the period 3/25/2024 through 3/25/2024

Printed 3/26/2024 1:45:30 PM						rage i
Sponsor	Payment	Tax	Net	Agency	AcctRep	NatRep
24030145.0 PrePayment Credit Card for WWIS FM / C	291.00	0.00	291.00	0.00	43.65	0.00
0640 Bill Laurent	291.00	0.00	291.00	0.00	43.65	0.00
Report Total	291.00	0.00	291.00	0.00	43.65	0.00

Bill Labrent

WWIS RADIO
W11573 TOWN CREEK RD
BLACK RIVER FALLS
WI 54615
715-284-4391

03/25/2024

14:32

Sale

Trans #: 2 Batch #: 192

MANUAL **/**

TOTAL AMT: USD \$291.00

Resp: APPROVAL 143519
Code: 408519498892
TransID: 0325MDJF4EJHA
CVC Rsp: M-VCode Match

Cardholder acknowledges receipt of goods and obligations set forth by the cardholder's agreement with issuer.

X_____