

# Key Broadcasting, Inc.

## New Traffic Order Form

Date: 05/14/2024

Station: WTCW / WVKQ

**Customer Information**

Name: Casebolt Marketing for Randy Thompson for State Senate  
 Address: Po Box 487  
 City, State, ZIP: Shelbiana KY 41562  
 Phone: 606-218-1198  
 Contact Name: John Roberts

Owner Name: Casebolt Marketing for Randy Thompson for State Senate  
 Owner Address: Po Box 487  
 City, State, ZIP: Shelbiana KY 41562  
 Owner Phone: 606-218-1198

**Order Information**

Order #: May 14, 2024 - May 21, 2024 - Randy Thompson for State Senate  
 Product Name: Political  
 Promotion: reg sales  
 Script?: No  
 Billing Type: Calendar Billing  
 Spots Total: \$102.60  
 Total Spots: 36

Order #: 1972 & 1973  
 Co-opt Product: none  
 Program: n/a  
 Co-opt Script: none  
 Category: Political  
 Digital Total: \$0.00  
 Total Money Owed: \$102.60

Notes: \_\_\_\_\_

**Spots**

AM/FM	Rate	Length	Start Date	End Date	Start Time	End Time	M	T	W	Th	F	Sa	Su	Total Spots	Subtotal
FM	2.85	15	2024-05-14	2024-05-14	12:00:00	13:00:00	0	2	0	0	0	0	0	2	\$5.7
FM	2.85	30	2024-05-14	2024-05-14	16:00:00	17:30:00	0	2	0	0	0	0	0	2	\$5.7
FM	2.85	30	2024-05-14	2024-05-21	07:00:00	08:30:00	2	2	2	2	2	0	0	12	\$34.2
FM	2.85	30	2024-05-15	2024-05-21	12:00:00	13:00:00	2	2	2	2	2	0	0	10	\$28.5
FM	2.85	30	2024-05-15	2024-05-21	16:00:00	17:30:00	2	2	2	2	2	0	0	10	\$28.5

**Monthly Totals**

2024			
January: \$0	February: \$0	March: \$0	April: \$0
May: \$102.6	June: \$0	July: \$0	August: \$0
September: \$0	October: \$0	November: \$0	December: \$0

Employee Signature:

X

Printed Name: Beth Wright

Customer Signature:

X

Printed Name: \_\_\_\_\_

If a Customer's account is placed for collection with a third-party collection agency, the Customer agrees to pay a collection fee in the amount of the greater of \$25 or 25%, of the amount placed for collection, and any attorney fees incurred.

Forcht Broadcasting Inc and Radio Station(s) WTCW / WVKQ (the "Station(s)") do not and will not discriminate, in any way on the basis of race or ethnicity, with respect to its (their) advertising practices. No advertiser may use the Station(s) to discriminate

### CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.

I, Keith Casebolt, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE  FEDERAL CANDIDATE  
 STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED	
Candidate name:	<u>Randy Thompson</u>
Authorized committee:	
Agency requesting time (and contact information):	<input type="checkbox"/> N/A <u>Casebolt Marketing</u>
Candidate's political party:	<u>Republican</u>
Office sought (no acronyms or abbreviations):	<u>State Representative</u>
Date of election:	<u>5/21/2024</u> <input type="checkbox"/> General <input checked="" type="checkbox"/> Primary
Treasurer of candidate's authorized committee:	
<p>The undersigned represents that:</p> <p>(1) the payment for the broadcast time requested has been furnished by (check one box below):</p> <p><input checked="" type="checkbox"/> the candidate listed above who is a legally qualified candidate, or</p> <p><input type="checkbox"/> the authorized committee of the legally qualified candidate listed above;</p> <p>(2) this station is authorized to announce the time as paid for by such person or entity; and</p> <p>(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).</p> <p><b>THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.</b></p>	
Candidate/Committee/Agency	Station Representative
Signature: <u>[Signature]</u>	Signature: <u>[Signature]</u>
Name: <u>Keith Casebolt</u>	Name: <u>Beth Wright</u>
Date of Request to Purchase Ad Time: <u>5/13/24</u>	Date of Station Agreement to Sell Time:

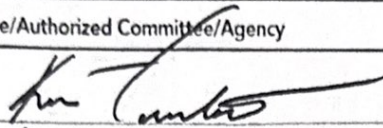


**Federal Candidate Certification:**

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:

Keith Caselott

Date:

5/13/24

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?

Yes

No

Date ad received:

5/13/24

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 #:

Station Call Letters:

Date Received/Requested:

WXKQ

May

Est. #:

Station Location:

Run Start and End Dates:

May King, KY 41851

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 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 OPIF.