## CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.									
13000									
7000	, hereby request station time as follows:								
EEDE	RAL CANDIDATE								
IDENTIFY CANDIDATE TYPE									
STATE	E OR LOCAL CANDIDATE								
ALLOUESTRONS/BROCK	SIMUST BE/COMPLETED								
Candidate name:									
Brian Dose									
Authorized committee:	<b>\</b>								
Committee to Elect Bings	Dose								
Agency requesting time (and contact information):	,								
N/A									
Candidate's political party:									
Domocrat									
Office sought (no acronyms or abbreviations):									
Office sought (no acronyms or abbreviations): La Scille County Board Chairman									
	General								
Date of election: 3/19/2024	- Constant								
Treasurer of candidate's authorized committee:									
Jern Hicks									
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.									
Canadalaha /Canadalaha /A	C								
Candidate/Committee/Agency	Station Representative								
Signature:	Signature: Jamy L. Som grot								
Name: Brian Sose	Name: Manny L Sondgeroth								
Date of Request to Purchase Ad Time: 2/16/2024	Date of Station Agreement to Sell Time: 2/16/2024								

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/A	Agency										
Signature:											
Name: Blan Dose											
Date: 2/16/2024											
TO BECOMPLETED BY STATION ONLY WITH THE PROPERTY OF THE PROPER											
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 #: 38/72	Station Call Letters: WCMY	Date Received/Requested:									
Est. #:	Station Location: Ottawa. 12	Run Start and End Dates: 3/5 - 3/19 /24									
use this space to document schedule of t purchased or attach separately. If station	affic system print-out) or other documents ime purchased, when spots actually aired, will not upload the actual times spots aired information immediately should be placed	reflecting this transaction to the OPIF or the rates charged and the classes of time d until an invoice is generated, the name									

## **Sales Order**

	\ A \ C \ A \			<i>(</i> = 1.4														
Stations: WCMY-AM, WRKX-FM																		
Contract Name: Brian Dose 2024																		
													mmission					
Revenue Type:																		m %: 14
Advertiser:	COMN	1 TC	ELECT	BRIAN	DOS	E					Mak	egood	Policy:	W	thin Co	ontract I	Dates	
Address:	Attn: E	RIA	N DOSE															
	735 5t	h A	/enue															
City:	Ottawa	<b>a</b>		State: IL	Zip:			6	13	50								
Product Name:	BD M	IAR	CH 2024															
Competitive Co	de: Po	olitic	al-Local															
WCN									CM	′-A	M							
No -	TES	Alt	TIM		LEN		_					ITION		I	RATE		OTALS	PTY
1 3/05/24	3/19/24	wks	START 6:00 AM	10:00 AM	30	M 4	T 4	W 4	_	_	_	A SU	Per Wk	D/W D	12.00	SPOTS 44	\$\$ 528.00	3
															TOTAL	. GROS	SS \$528.00	, NET \$528.00
(9																		
WRM						RK)	<b>(-F</b>	M				,						
No START	TES END	Alt wks	START	END END	LEN	М	Т	W	- 133 - 13-72	1000 mm/s		TION A SU	Per Wk	DW	RATE	SPOTS	OTALS \$\$	PTY
1 3/05/24	3/19/24	WNS	6:00 AM	7:00 PM	30	8	8	8	8	_	_		40	D	8.00	88	704.00	3
	•																	
															TOTAL	. GROS	S \$704.00	, NET \$704.00
Billing Projec	tions: By M		/lar 24															
	CA		232.00															
	ST		232.00															
Print Spo	t Prices											TO	TAL SPO	TS .				132
												GR	OSS TOT	AL\$				1,232.00
												AD.	JUSTED	SPOTS				132
												AD.	JUSTED .	TOTAL	\$			1,232.00
												API	PROVE	DE	CLINE			
												V	1297tson, 02/16/24 @11:08AM					
										Sales Manager								
												V	3			- 10 <del>73</del>	r, 02/16/24 @2:2	24PM
									••••			(				ncal Sales I		