

Station	Format	DMA	Day	Time	Len.	Rate	1/5-1/9	1/10-1/15	Total Spots	Gross Cost	Station Total	Rural Total
KCHE-AM	Adult Standards	Sioux City	M-F	6-10a	60	\$18.82	10	20	30	\$564.60	\$282.30	\$197.61
KCHE-AM	Adult Standards	Sioux City	M-F	10a-3p	60	\$18.82	10	20	30	\$564.60	\$282.30	\$197.61
KCHE-AM	Adult Standards	Sioux City	M-F	3-7p	60	\$18.82	10	20	30	\$564.60	\$282.30	\$197.61
KCHE-AM	Adult Standards	Sioux City	Sa	6a-7p	60	\$18.82	4	5	9	\$169.38	\$84.69	\$59.28
KCHE-AM	Adult Standards	Sioux City	Su	6a-7p	60	\$18.82	4	5	9	\$169.38	\$84.69	\$59.28
									108	\$2,032.56	\$1,016.28	\$711.40

KCHE-FM	Classic Hits	Sioux City	M-F	6-10a	60	\$18.82	10	20	30	\$564.60	\$282.30	\$197.61
KCHE-FM	Classic Hits	Sioux City	M-F	10a-3p	60	\$18.82	10	20	30	\$564.60	\$282.30	\$197.61
KCHE-FM	Classic Hits	Sioux City	M-F	3-7p	60	\$18.82	10	20	30	\$564.60	\$282.30	\$197.61
KCHE-FM	Classic Hits	Sioux City	Sa	6a-7p	60	\$18.82	4	5	9	\$169.38	\$84.69	\$59.28
KCHE-FM	Classic Hits	Sioux City	Su	6a-7p	60	\$18.82	4	5	9	\$169.38	\$84.69	\$59.28
									108	\$2,032.56	\$1,016.28	\$711.40

Totals	216	\$4,065.12	\$2,032.56	\$1,422.79
---------------	------------	-------------------	-------------------	-------------------

KCHH

FM 92.1 AM 1440

Sales Rep: Simon

Start: 1.6.24 End 1.15.24

Cart # K3746J

15 Sec
 30 Sec
 60 Sec
 Other: _____

Standard Broadcast
 Gross Net
 Calendar
 Net

New Account

Name Rural AM/FM

Address _____

Phone _____

Fax _____

Contact _____

Coop Company YES, Political

Product _____

Promotion Her own words

Banked Spots Used _____

BILLING

NUMBER	RATE	COST
108-60's KCHH fm	@ \$18 ⁰⁰	@ 2,032 ⁵⁶
108-60's KCHH Am	@ \$18 ⁰⁰	@ 2,032 ⁵⁶
TERM _____		TOTAL = \$4,065 ¹²

Ads to Bank _____ @ _____

Ads to Bank _____ @ _____

SHORT TERM: 6A-10A 10A-3P 3P-7P 6A-7P

Month	Jan	Jan	Jan	Jan
1				
2				
3				
4				
5				
6				4
7				4
8	5	5	5	
9	5	5	5	
10	5	5	5	
11	5	5	5	
12	5	5	5	
13				5
14				5
15	5	5	5	
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

Bill January Double Agency

Special Instructions:

KCHH Net \$2,032⁵⁶

Rural AM/FM \$1,422⁷⁹

LONG TERM:

	TIMES	RATE
Monday	_____	@ _____
Tuesday	_____	@ _____
Wednesday	_____	@ _____
Thursday	_____	@ _____
Friday	_____	@ _____
Saturday	_____	@ _____
Sunday	_____	@ _____

TOTAL PER MONTH 30 30 30 19

**ISSUE (Non-candidate) ADVERTISEMENT
AGREEMENT FORM**

I, Rural AMFM, hereby request station time as follows: See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

Check one:

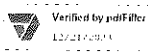

Ad "communicates a message relating to any political matter of national importance" by referring to (1) a legally qualified candidate for federal office; (2) an election to federal office; (3) a national legislative issue of public importance (e.g., health care legislation, IRS tax code, etc.); or (4) a political issue that is the subject of controversy or discussion at the national level.

Ad does NOT communicate a message relating to any political matter of national importance (e.g., relates only to a state or local issue).

ALL QUESTIONS/BLOCKS MUST BE COMPLETED		
Station time requested by: Fight Right Inc		
Agency name: Rural AMFM		
Address: 190 Monroe Ave NW, Grand Rapids, MI 49503		
Contact: Hailey Simmons	Phone number: 517-240-7939	Email: hailey@ruralamfm.com
Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission [for federal committees] with no acronyms; name must match the sponsorship ID in ad):		
Name: Fight Right Inc		
Address: 2241 N. Monroe St,#1323, Tallahassee FL 32303		
Contact: Kaylen Melton	Phone number: -----	Email: kaylen@crosbott.com
Station is authorized to announce the time as paid for by such person or entity.		
List ALL of the chief executive officers or members of the executive committee or board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary.):		
Kaylen Melton - Treasurer		
By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).		
If ad refers to a federal candidate(s) or federal election, list ALL of the following:		<input type="checkbox"/> N/A
Name(s) of every candidate referred to: Nikki Haley & Donald Trump & Ron DeSantis		
Office(s) sought by such candidate(s) (no acronyms or abbreviations): President of the United States		
Date of election: 1/15/24		
Clearly identify EVERY political matter of national importance referred to in the ad (no acronyms); use separate page if necessary:		<input type="checkbox"/> N/A
Educational Curriculum & Elective surgeries on minors		

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

Advertiser/Sponsor	Station Representative
Signature: <i>Hailey Simmons</i> 	Signature: 
Name: Hailey Simmons	Name: <i>Simon Fuller</i>
Date of Request to Purchase Ad Time: 1/5/24	Date of Station Agreement to Sell Time: <i>1/5/24</i>

TO BE COMPLETED BY STATION ONLY

Ad submitted to station? Yes No Date ad received: *1/5/24*

Note: Must have separate PB-19 forms (or the equivalent, e.g., addendums) for each version of the ad (i.e., for every ad with differing copy).

If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.

Disposition:

- Accepted
 Accepted IN PART (e.g., ad not received to determine content)*
 Rejected – provide reason (optional):

*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any:

n/a

Contract #: n/a	Station Call Letters: <i>KLITE AM & KLITE FM</i>	Date Received/Requested: <i>1/5/24</i>
Est. #: n/a	Station Location: <i>Cherokee, IA</i>	Run Start and End Dates: <i>1/5/24 - 1/15/24</i>

For national issue ads only (not required for state/local issue ads):

Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.

N/A. Free time. There are no rates, invoice, or classes of time related to this run of spots. See either the attached for information on when the spots aired or this station will upload this information as soon as it is avail