Order #1260224: High Groun../Deering/R/../March Primar/

👸 📓 👼 Date	Action	Line	Comment	Ву	Total \$	# Spots	Expected GRI
a 03/11/24 12:35	:00 PM Processed		<sync process=""></sync>	Donat Baz	\$840.00	30	0.00
03/11/24 12:22	:26 PM Approved			Jennifer M	\$840.00	30	0.00
03/11/24 12:22	:21 PM Approval Workflow		[Centralized AR - Business Office Approval Needed Default]	Jennifer M	\$840.00	30	0.00
03/11/24 9:20	:42 AM Approval Workflow		[Sales Manager - Ready Default]	Daniel Gre	\$840.00	30	0.00
03/09/24 9:07	:10 PM Ready for approval C	r	Ready. Once this moves thru the system, Region 4 will send a portal for the agency to pay. All forms are attached.	Keith Palm	\$840.00	30	0.00
03/09/24 9:03	:25 PM New order created		<new order=""></new>	Keith Palm	\$0.00) (0.00

[Sorted by: Date]

ORDER

Orders

Order / Rev:

Alt Order #:
Product Desc:

1260224

WJBC-AM	WJBC-AM				
Primary AE: Keith Palmgren	Keith Palmgren				
Sales Office: L-BLO					
Sales Region: Local					
egies					
Billing Type: Cash	Cash Calendar				
Billing Calendar: Calendar					
Billing Cycle: EOC					
Agency Commission: 15%	15%				
District					
New Business End:					
Advertiser External ID:					
Agency External ID:					
Unit Code: General	General 00:15:00				
Order Separation: 00:15:00					
Totals					
· · · · · · · · · · · · · · · · · · ·	Amount Rating				
\$714.00 March 2024 30 \$840.00	\$714.00 0.00				
Totals 30 \$840.00	\$714.00 0.00				
Start Of Order - End Of Order 100%					
Start Date / End Date Order % Start Of Order - End Of Order 100%					

Ln Ch	Start	End	Inventory Code	Break	Start/End T	īme Days	Len S	oots	Rate Pri	Rtg Type	Spots	Amount
N 1 WJBCA	03/12/24	1 03/15/24	M-F AM Drive	CM	6a-10a	-TWTF	1:00	20	\$28.00P-50	0.00 NM	20	\$560.00
			M-F									
<u>Sta</u>	rt Date	End Date	<u>Weekdays</u>	Spots/Week	<u>Rate</u>	Rating						
Week: 03/	11/24	03/17/24	-TWTF	20	\$28.00	0.00						
N 2 WJBCA	03/18/24	1 03/19/24	M-F AM Drive	CM	6a-10a	MT	1:00	10	\$28.00P-50	0.00 NM	10	\$280.00
			M-F									
<u>Sta</u>	rt Date	End Date	<u>Weekdays</u>	Spots/Week	<u>Rate</u>	Rating						
Week: 03/	18/24	03/24/24	MT	10	\$28.00	0.00						
									-	Γotals	30	\$840.00

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See Invoice for actual schedule and charges.						
l,	, hereby request station time as follows:						
IDENTIFY CANDIDATE TYPE FEDE	RAL CANDIDATE						
STATE	OR LOCAL CANDIDATE						
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED						
Candidate name:							
Authorized committee:							
Agency requesting time (and contact information):							
N/A							
Candidate's political party:							
Office sought (no acronyms or abbreviations):							
Date of election:	General Primary						
Treasurer of candidate's authorized committee:							
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:						
Name:	Name:						
Date of Request to Purchase Ad Time:	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: Date: TO BE COMPLETED BY STATION ONLY Ad submitted to Station? Yes No Date ad received: 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 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.