ORDER

Orders Order / Rev: 658989 Alt Order #: Product Desc: Ballot Issue contract 4459424 WUSZ-FM Estimate: 5354 Flight Dates: 05/09/24 - 05/15/24 Primary AE: Regional Rep Original Date / Rev: 05/08/24 / 05/08/24 Sales Office: Reg Order Type: **GENERAL** Sales Region: National Agency Name: **Media Financial Services Buying Contact:** Linley Grande Billing Type: Cash Accounts Payable Billing Contact: Billing Calendar: Broadcast 1655 Palm Beach Lakes Blvd Ste 903 EOM/EOC Billing Cycle: West Palm Beach, FL 33401 Agency Commission: 15% Advertiser Name: Minnesota Citizens Concerned for Life Demographic: HH05/08/24 New Business End: Product Codes: PL2 Advertiser External ID: Revenue Code 1: AGY Agency External ID: Revenue Code 2: POL Unit Code: General Revenue Code 3: ISS

Start Date End Date # Spots Gross Amount Net Amount M	Bill Plan								
The Part of Process and the Part of the Pa	Start Date	End Date	# Spots	Gross Amount	Net Amount	Month			

SEL

Start Date	End Date	# Spots	Gross Amount	Net Amount	Month	# Spots	Gross Amount	Net Amount	Rating
04/29/24	05/15/24	29	\$1,400.00	\$1,190.00	May 2024	29	\$1,400.00	\$1,190.00	0.00
					Totals	29	\$1,400,00	\$1 190 00	0.00

Start Of Order - End Of Order

Order Separation:

00:35:00

Totals

29

\$1,400.00

100%

Regional Rep

Priority:

ccount Executives				
ccount Executive	Sales Office	Sales Region	Start Date / End Date	Order %

Ln Ch Star	t End	Inventory Code	Break	Start/End	Гime Days	Len Sp	ots	Rate Pri	Rtg Type S	Spots	Amount
N 1 WUSZ 05/09)/24 05/15/24	M-F 6a-10a	СМ	6a-10a		1:00	0	\$50.00250	0.00 NM	12	\$600.00
		M-F 6a-10a									
Start Date	End Date	<u>Weekdays</u>	Spots/Week	<u>Rate</u>	Rating						
Week: 05/06/24	05/12/24	42	6	\$50.00	0.00						
Week: 05/13/24	05/19/24	222	6	\$50.00	0.00						
N 2 WUSZ 05/09	9/24 05/15/24	M-F 3p-7p	СМ	3p-7p		1:00	0	\$50.00250	0.00 NM	12	\$600.00
		M-F 3p-7p									
Start Date	End Date	<u>Weekdays</u>	Spots/Week	Rate	Rating						
Week: 05/06/24	05/12/24	42	6	\$50.00	0.00						
Week: 05/13/24	05/19/24	222	6	\$50.00	0.00						
N 3 WUSZ 05/09	0/24 05/12/24	M-Su 6a-7p	СМ	6a-7p		1:00	0	\$40.00200	0.00 NM	5	\$200.00
		M-Su 6a-7p									
Start Date	End Date	<u>Weekdays</u>	Spots/Week	<u>Rate</u>	Rating						
Week: 05/06/24	05/12/24	32	5	\$40.00	0.00						
Contract of the second							all and				

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 Represent Signature: FlexPointMedia Signature: Name: FlexPoint Media Date of Request to Purchase Ad Time: 04/18/2024 Date of Station Agreement to Sell Time: TO BE COMPLETED BY STATION ONLY Ad submitted to station? Date ad received: 5/1/24 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: Contract #: 658989 Station Call Letters: Date Received/Requested: 5-8-24 WUSZ Est. #: Station Location: Run Start and End Dates: 5/9 -5/15 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

ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

, FlexPoint Media	, hereby request station time as	follows: See Order for proposed					
schedule and charges. See Invo	oice for actual schedule and charge	es.					
Check one:	· · · · · · · · · · · · · · · · · · ·						
(1) a legally qualified candidat	e relating to any political matter of nationa te for federal office; (2) an election to fede g., health care legislation, IRS tax code, etc.); ussion at the national level.	eral office: (3) a national logislative					
	a message relating to any political matter o	of national importance (e.g., relates					
ALL QUE	ESTIONS/BLOCKS MUST BE CO)MPLETED					
Station time requested by:							
Agency name: FlexPoint Media							
Address: PO Box 1051, New Albany, OH 4	1 305						
Contact: FlexPoint Media	Phone number: 202-417-2274	Email: info@flexpointmedia.com					
Name of advertiser/sponsor (list entity's committees] with no acronyms; name m	's full legal name as disclosed to the Fed nust match the sponsorship ID in ad):						
Name: Minnesota Citizens Concerned For							
Address: 4249 Nicollet Ave SO, Minneapoli	is, MN 55409						
Contact: Catherine Blaeser	Contact: Catherine Blaeser Phone number: 612-825-6831 Email: info@mccl.org						
Station is authorized to announce the t	time as paid for by such person or entity	√ .					
List ALL of the chief executive officers o group(s) of the advertiser/sponsor (Use Treasurer- Catherine Blaeser	or members of the executive committee	or board of directors or other governing					
By signing below, advertiser/sponsor representative committee and board of directors	resents that those listed above are the on ors or other governing group(s).	ly executive officers, members of the					
If ad refers to a federal candidate(s) or f	federal election, list ALL of the following	g: N/A					
Name(s) of every candidate referred to:		<u></u>					
Office(s) sought by such candidate(s) (no	o acronyms or abbreviations):						
Date of election:							
Clearly identify EVERY political matter of ad (no acronyms); use separate page if r	of national importance referred to in the necessary:	e N/A					
Abortion							