

**POLITICAL/ISSUE ADVERTISING  
INQUIRY/REQUEST PUBLIC FILE FORM**

*Instructions: This form must be completed as to all requests, both oral and written, for broadcast time (1) to be used by or on behalf of a candidate for public office, or (2) involving a controversial issue of public importance (including political and legislative matters where there is no Ause by a legally qualified candidate). It is to be kept in the station Public Inspection File for a period of two years.*

- |     |   |   |
|-----|---|---|
| 1.  | Date and time of request:   | 10/1/18 915am                           |
| 2.  | Name of the person making request:  | Caroline Bahng                          |
| 3.  | Agency (if any):  | Screen Strategies Media                 |
| 4.  | Address of agency:  | 11150 Fairfax Blvd<br>Fairfax, VA 22030 |
| 5.  | Telephone number of agency:   | 703-272-7300                            |
| 6.  | Name of candidate or<br>description of issue:                             | Alabama for a Healthy Family            |
| 7.  | Name of candidates authorized<br>committee or name of issue ad sponsor:   | Alabama for a Healthy Family            |
| 8.  | Name of treasurer of candidates<br>committee or issue ad sponsor contact: | Katie Glenn                             |
| 9.  | Address of candidates committee<br>or issue ad sponsor contact:           | PO Box 4476<br>Montgomery, AL 36103     |
| 10. | Telephone number of candidates<br>committee or issue ad sponsor contact:  | 205-453-9113                            |

11. If the purchaser is not an individual, list the chief executive officers or members of the executive committee or of the board of directors of the entity or entities that is/are paying for the advertising (use additional pages if necessary):

Name: Katie Glenn	Title: Campaign Manager/Treasurer
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____

12. Programs or times requested  
(use additional pages if necessary): All
13. Dates requested  
(use additional pages if necessary): 10/24-11/6
14. Class of time requested  
(use additional pages if necessary): Fixed
15. Length of spot/program time requested  
(use additional pages if necessary): :30

16. Request made: In writing? Orally? X  
(if in writing, attach and retain)

17. Disposition of request: **Granted**  
Not Granted

If not granted, state reason or reasons in space below. If denied in writing, attach and retain.

If granted, attach contract, invoice and schedule of date and time on which the ad(s) actually aired, when available.)

18. If granted, rate charged  
(use additional pages if necessary): FIXED

*If the advertisement refers to a candidate, please complete Questions 19-24.*

19. Name of candidate  
(if different from Question 6 above): \_\_\_\_\_
20. Political party of candidate:
21. Office for which candidate is running?
22. Is it a: Federal Office? State Office?  
Local Office?
23. Election for which candidate is  
campaigning:
24. Date of election:

*If the request is by or on behalf of a candidate, please complete Questions 25-27.*

25. Request for documentation that candidate  
is legally qualified. (Attach any written  
documentation received.) Yes \_\_\_\_\_ No \_\_\_\_\_
26. Date Political Disclosure Form submitted  
to requestor:
27. If federal candidate, has candidate or  
authorized committee signed Bipartisan  
Campaign Reform Act (BCRA)  
Certification? \_\_\_\_\_

*Note: For issue advertisements where there is no use@ by a legally qualified candidate and the advertisement does not relate to any political or legislative matter of national importance, the station may elect to only complete Questions 1,2,3,4,5, 6, 7, 8, 9, 10, and 11 of this form.*

COMMENTS:

\_\_\_\_\_  
Signature of Person Receiving Request On  
Behalf of Station