CANDIDATE ADVERTISEMENT AGREEMENT FORM

·	charges. See Invoice for actual schedule and charges.		
I, Bluewest Media	Media , hereby request station time as follows:		
IDENTIFY CANDIDATE TYPE	FEDERAL CANDIDATE STATE OR LOCAL CANDIDATE		
ALL QUESTIONS	BLOCKS MUST BE COMPLETED		
Candidate name:			
Andy Beshear			
Authorized committee:			
Andy Beshear for Governor			
Agency requesting time (and contact information):			
N/A BlueWest Media			
Candidate's political party:			
Democrat			
Office sought (no acronyms or abbreviations):			
Governor			
Date of election: November 7, 2023	✓ General Primary		
Treasurer of candidate's authorized committee:			
Melinda Karns			
The undersigned represents that: (1) the payment for the broadcast time requested has the candidate listed above who is a legally qualified the authorized committee of the legally qualified.	ualified candidate, or		
(2) this station is authorized to announce the time as			
	pala for by such person of entity, and policies, including applicable classes and rates, discount, promotion		
THIS STATION DOES NOT DISCRIMINATE OR PER IN THE PLACEMENT OF ADVERTISING.	RMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY		
Candidate/Committee/Agency	Station Representative		
Signature: Mary Wittemyer	Signature: S. Neil Middleton		
Name: Mary Wittemyer	Name: S. Neil Middleton 10/26/23		
Date of Request to Purchase Ad Time: 05/48/2022 /4	10/26/23 Date of Station Agreement to Sell Time: 10/26/23		

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? X Yes No			
Date ad received: 10/11/23 & 10/26/23			
Federal candidate certification signed (above): Yes No X N/A			
Disposition:			
X 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): N/A			
Contract #: 3174457 H #747903 & 748015	Station Call Letters: WYMT-TV	Date Received/Requested: 08/14/2023	
Est. #: 2988	Station Location: HAZARD, KY	Run Start and End Dates: 10/30/23 - 11/7/23	
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. 2988			