

CONTRACT



WJAN
 13001 NW 107th Ave
 Hialeah Gardens, FL 33018
 (305) 592-4141

<u>Contract / Revision</u> 10793 /		<u>Alt Order #</u>
<u>Advertiser</u> Cabrera,Marino Kevin/District 6 Commission		<u>Original Date / Revision</u> 10/21/22 / 10/24/22
<u>Contract Dates</u> 10/25/22 - 10/30/22	<u>Estimate #</u> ADDITIONAL	
<u>Product</u> KEVIN MARINO CABRERA PARA COMISIONADO		
<u>Billing Cycle</u> EOM/EOC	<u>Billing Calendar</u> Broadcast	<u>Cash/Trade</u> Cash
<u>Property</u> WJAN	<u>Account Executive</u> Fernando Checa	<u>Sales Office</u> America CV Mia
<u>Special Handling</u>		
<u>Demographic</u> Households		
<u>Agency Code</u>	<u>Advertiser Code</u>	<u>Product 1/2</u>
<u>Agency Ref</u>	<u>Advertiser Ref</u>	

And:

MTC Group Inc
 1521 SW 10 St
 Miami, FL 33135

*Line	Ch	Start Date	End Date	Description	Start/End Time	Days	Length	Spots/Week	Rate	Type	Spots	Amount
N 1	WJAN	10/25/22	10/30/22	M-F 4p-5p	4p-5p		:30			NM	4	\$2,400.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>				<u>Spots/Week</u>	<u>Rate</u>			
Week:		10/24/22	10/30/22	-TWTF--				4	\$600.00			
N 2	WJAN	10/25/22	10/30/22	M-F 6-7PM	6-7PM		:30			NM	4	\$2,600.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>				<u>Spots/Week</u>	<u>Rate</u>			
Week:		10/24/22	10/30/22	-TWTF--				4	\$650.00			
N 3	WJAN	10/25/22	10/30/22	Su	10 p-11p	-----S	:30	1	\$250.00	NM	1	\$250.00
Totals											9	\$5,250.00

Time Period	# of Spots	Gross Amount	Agency Comm.	Net Amount
09/26/22 - 10/30/22	9	\$5,250.00	(\$787.50)	\$4,462.50
Totals	9	\$5,250.00	(\$787.50)	\$4,462.50

Signature: _____ **Date:** _____

(* Line Transactions: N = New, E = Edited, D = Deleted)

Notwithstanding to whom bills are rendered, advertiser, agency and service, jointly and severally, shall remain obligated to pay to station the amount of any bills rendered by station within the time specified and until payment in full is received by station. Payment by advertiser to agency or to service or payment by agency to service, shall not constitute payment to station. Station will not be bound by conditions, printed or otherwise contracts, insertion orders, copy instructions or any correspondence when such conflict with the above terms and conditions. Two week advance cancellation notice is required unless otherwise specified.

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.
 I, Kevin Marino Cabrera, hereby request station time as follows:

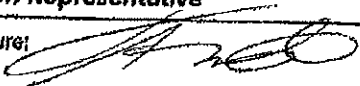
IDENTIFY CANDIDATE TYPE **FEDERAL CANDIDATE**
 STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Kevin Marino Cabrera
 Authorized committee: N/A
 Agency requesting time (and contact information):
 N/A
 Candidate's political party: N/A
 Office sought (no acronyms or abbreviations): MIAMI DADE COUNTY Commissioner, District 6
 Date of election: November 8 General Primary
 Treasurer of candidate's authorized committee: N/A

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 (not applicable to federal candidates).

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: <u>For Candidate</u> <u>Marjorie T. Carollo, MTC Group, Inc</u> Name: <u>Kevin Marino Cabrera</u> Date of Request to Purchase Ad Time:	Signature:  Name: <u>FANNING'S CO FARM 'L</u> Date of Station Agreement to Sell Time:

Federal Candidate Certification: N/A
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 N/A

Signature: N/A

Name:

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No Date ad received: _____

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

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:

*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 #: 10793

Station Call Letters: WSTAN

Date Received/Requested: 10/24/22

Est. #:

Station Location: Hialeah Gardens, FL

Run Start and End Dates: 10/25/22 to 10/30/22

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.