

TIME ORDER

Co-Op:

Advertiser: Dr Al Gross for US Senate Phone: 216-535-3967 Fax: _____

Address: invoices@mediafinancial.com City: Philadelphia State: PA Zip Code _____

Media Financial Services

K-WAVE FM 105

Est.# _____ Order # **3179586**

Start: 10/29/20 Stop: 11/01/20

MON	TUE	WED	THU	FRI	SAT	SUN

of spots 20 :30 :60 : Specified

Rate: \$23.00 Total: \$460.00

AAA	See	Sched	ule	For	Exact	Place	ment
DAP							
TAP							

KPEN FM 102

Est.# _____ Order # **3179586**

Start: 10/29/20 Stop: 11/01/20

MON	TUE	WED	THU	FRI	SAT	SUN

of spots 22 :30 :60 : Specified

Rate: \$22.00 Total: \$484.00

AAA	See	Sched	ule	For	Exact	Place	ment
DAP							
TAP							

K-BAY FM 93.3

Est.# _____ Order # **3179586**

Start: 10/29/20 Stop: 11/01/20

MON	TUE	WED	THU	FRI	SAT	SUN

of spots 23 :30 :60 : Specified

Rate: \$22.00 Total: \$506.00

AAA	See	Sched	ule	For	Exact	Place	ment
DAP							
TAP							

KGTL AM 620 & FM 100

Est.# _____ Order # **3179586**

Start: 10/29/20 Stop: 11/01/20

MON	TUE	WED	THU	FRI	SAT	SUN

of spots 23 :30 :60 : Specified

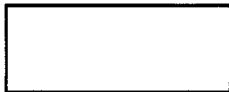
Rate: \$20.00 Total: \$460.00

AAA	See	Sched	ule	For	Exact	Place	ment
DAP							
TAP							

K-WAVE	<u>\$460.00</u>
KPEN	<u>\$484.00</u>
K-BAY	<u>\$506.00</u>
KGTL	<u>\$460.00</u>
Sub-total	<u>\$1,910.00</u>
Discount	< _____ >
Less Agency	< <u>\$573.00</u> >
Tax	<u>\$40.11</u>
Total	<u>\$1,377.11</u>

Contract # for invoicing: 4392848

Approved by: Linley Grande
 Email: Fax: Date / Time: 10/28/2020 11:46
 Sales Person: Michael Becker



TIME ORDER

Co-Op:

Advertiser: Dr Al Gross for US Senate Phone: 216-535-3967 Fax: _____

Address: invoices@mediafinancial.com City: Philadelphia State: PA Zip Code _____

Media Financial Services

K-WAVE FM 105

Est.# _____ Order # **3179586**

Start: 10/31/20 Stop: 11/01/20

	MON	TUE	WED	THU	FRI	SAT	SUN
# of spots <u>8</u> <input type="checkbox"/> :30 <input checked="" type="checkbox"/> :60 <input type="checkbox"/> : Specified							
Rate: <u>\$15.00</u> Total: <u>\$120.00</u>	See	Sched	ule	For	Exact	Place	ment
<input checked="" type="checkbox"/> AAA							
<input checked="" type="checkbox"/> DAP							
<input type="checkbox"/> TAP							

KPEN FM 102

Est.# _____ Order # **3179586**

Start: 10/31/20 Stop: 11/01/20

	MON	TUE	WED	THU	FRI	SAT	SUN
# of spots <u>8</u> <input type="checkbox"/> :30 <input checked="" type="checkbox"/> :60 <input type="checkbox"/> : Specified							
Rate: <u>\$15.00</u> Total: <u>\$120.00</u>	See	Sched	ule	For	Exact	Place	ment
<input checked="" type="checkbox"/> AAA							
<input checked="" type="checkbox"/> DAP							
<input type="checkbox"/> TAP							

K-BAY FM 93.3

Est.# _____ Order # **3179586**

Start: 10/31/20 Stop: 11/01/20

	MON	TUE	WED	THU	FRI	SAT	SUN
# of spots <u>8</u> <input type="checkbox"/> :30 <input checked="" type="checkbox"/> :60 <input type="checkbox"/> : Specified							
Rate: <u>\$15.00</u> Total: <u>\$120.00</u>	See	Sched	ule	For	Exact	Place	ment
<input checked="" type="checkbox"/> AAA							
<input checked="" type="checkbox"/> DAP							
<input type="checkbox"/> TAP							

KGTL AM 620 & FM 100

Est.# _____ Order # **3179586**

Start: 10/31/20 Stop: 11/01/20

	MON	TUE	WED	THU	FRI	SAT	SUN
# of spots <u>8</u> <input type="checkbox"/> :30 <input checked="" type="checkbox"/> :60 <input type="checkbox"/> : Specified							
Rate: <u>\$15.00</u> Total: <u>\$120.00</u>	See	Sched	ule	For	Exact	Place	ment
<input checked="" type="checkbox"/> AAA							
<input checked="" type="checkbox"/> DAP							
<input type="checkbox"/> TAP							

K-WAVE	<u>\$120.00</u>
KPEN	<u>\$120.00</u>
K-BAY	<u>\$120.00</u>
KGTL	<u>\$120.00</u>
Sub-total	<u>\$480.00</u>
Discount	< _____ >
Less Agency	< <u>\$144.00</u> >
Tax	<u>\$10.08</u>
Total	<u>\$346.08</u>

Contract # for invoicing: 4392848

Approved by: Linley Grande

Email: Fax: Date / Time: 10/28/2020 11:51

Sales Person: Michael Becker

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

I, Buying Time Media, LLC, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Dr. Al Gross

Authorized committee:

Dr. Al Gross for U.S. Senate

Agency requesting time (and contact information):

N/A 650 Massachusetts Ave. Suite 210 N.W. Washington D.C. 20001

Candidate's political party:

Democratic

Office sought (no acronyms or abbreviations):

United States Senate (Alaska)

Date of election:

November 3rd, 2020

General

Primary

Treasurer of candidate's authorized committee:

Jay Petterson

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:

Karen Diehl

Signature:

Michael Becker

Name:

Karen Diehl

Name:

Michael Becker

Date of Request to Purchase Ad Time:

Date of Station Agreement to Sell Time:

Political Candidate Certification

The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer to any political 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 of (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: JAY Patterson Treasurer

Date: 7/16/20

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).

Political candidate certification signed above: Yes No N/A

Discussed:

- 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 # Station Call Letters Date Received/Requested

Est. # Station Location Run Start and End Dates

Upload over the form and invoice for traffic system's print out, or other documents reflecting this transaction to the QPFF or use the spots 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 QPFF.