

Advertiser No:	1328235	Order No:	1329426236
Start Date:	03/24/2020	Co-op:	No
End Date:	03/31/2020	Package:	No
Month Type:	Calendar	Agency Comm:	0%
Revision #:	0		
CPE:			
AE:	Saucedo, Jennifer		
Entered:	3/23/2020 11:31 AM by Fusion		
Last Update:	3/23/2020 12:16 PM by gup1jas		
Note:	KGLX/KXTC LOUIE BONAGUIDI FOR MAYOR RUNOFF 3/31		
Note 2:			
Spl Req Inv:			

LOUIE BONAGUIDI FOR MAYOR

1999 Mcdevitt Pl
 Gallup, NM 87301

0.083125% tax will be applied to all net billings

Market Station	Bind To	Start Date	End Date	No Of Weeks	Rate Rev. Type	Skip W. M T W T F S S	Spots/ W.	Spot Length	Ord Spots	Ord Cost
1 Gallup NM KXTC-FM	06:00-21:00 Commercial	03/24/20	03/28/20	1	10.00 Local-Direct	0 0 3 0 3 0 3 0	9	30	9	90.00
2 Gallup NM KXTC-FM	06:00-21:00 Commercial	03/30/20	03/30/20	1	10.00 Local-Direct	0 3 0 0 0 0 0 0	3	30	3	30.00
3 Gallup NM KGLX-FM	06:00-21:00 Commercial	03/24/20	03/28/20	1	10.00 Local-Direct	0 0 4 4 4 4 4 0	20	30	20	200.00
4 Gallup NM KGLX-FM	06:00-21:00 Commercial	03/30/20	03/30/20	1	10.00 Local-Direct	0 5 0 0 0 0 0 0	5	30	5	50.00
5 Gallup NM KGLX-FM	06:00-17:00 Commercial	03/31/20	03/31/20	1	10.00 Local-Direct	0 0 5 0 0 0 0 0	5	30	5	50.00

No. of Spots/Misc/Digital: 42/0/0

Ordered Gross:	\$420.00
Agency Commission:	\$0.00
Ordered Net:	\$420.00
Total Net Due:	\$420.00
Tax:	\$34.91
Total Due:	\$454.91

	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Amt. Ord.:	42	0	0	0	0	0	0	0	0	0	0	0	0
Gross:	420.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net:	420.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Participating Customers

LOUIE BONAGUIDI FOR MAYOR 100%

Any and all sales or transaction taxes listed on this order confirmation are estimates. Actual sales or transaction tax payable will be reflected on your invoice. If you have questions related to the taxes associated with this transaction, please consult your tax professional.

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Louie Bonaguidi, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE
 STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Louie Bonaguidi

Authorized committee: N/A-

Agency requesting time (and contact information):
 N/A

Candidate's political party:
Nonpartisan - City Election -

Office sought (no acronyms or abbreviations):
Mayor for City of Gallop.

Date of election: March 31, 2020 (Runoff election) General Primary

Treasurer of candidate's authorized committee:
Guia Spolar.

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: Name: <u>LOUIE BONAGUIDI</u>	Signature: Name: <u>Mary Ann Armijo</u>
Date of Request to Purchase Ad Time: <u>3/20</u>	Date of Station Agreement to Sell Time: <u>3/20</u>

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:

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 #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

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.