P.O. Box 1889 Highlands, N.C. 28741 (828) 526-1045 FAX (828) 526-4900 Whic@dnet.net	FM 104. 5 soft & easy favorites	
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TIME ORDER CONTRACT

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DIRECT	☐ AGENCY	LI REGIONAL
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ADVERTISER_

CAN BUN!

LOTSON

CANCEL ☐ ADD TO NEW ORDER SUPERSEDES PREVIOUS CASH LOCAL BROADCAST ☐ TRADE CALENDAR NATIONAL CO-OP LI POLITICAL CITY/STATE/ZIP ADDRESS

COMPETING PRODUCT PACKAGE/PROGRAM SALESPERSON CITY/STATE/ZIP AGENCY ADDRESS CONTACT PHONE# LOG AS BUYER FAX# C.B. Cooper

The parties to this advertising agreement, affirm that nothing in the agreement, or any of the actions, benefits and obligations relating to it, discriminate in any way on the basis of race or ethnicity.

AUTHORIZED BY

NOTES_

FEBRUARY MARCH APRIL MAY JUNE JULY AUGUST SEPTEMBER OCTOBER NOVEMBER DECEMBER	MARCH APRIL MAY JUNE JULY AUGUST SEPTEMBER OCTOBER NOVEMBER DECEMBER	START END M T W T F S WEEK START END				N N	10/2		7	DATE					3	2	2	SIGNATURE 2	
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CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charge	s. See Invoice for actual schedule and charges.
1. JEThy WELLEN	, hereby request station time as follows:
I CANTO DATE I I FE	DERAL CANDIDATE ATE OR LOCAL CANDIDATE
ALL QUESTIONS/BLOG	CKS MUST BE COMPLETED
Candidate name: Candidate name: Candidate name: Candidate name: Candidate name:	
Authorized committee:	
Agency requesting time (and contact information):	
Candidate's political party: ORN GINCHEL	Election New 1 2000
Office sought (no acronyms or abbreviations): Tow i Bomo of Hollas	clamón Nov.7, 2003 or Comussiosa
Nov. 2, 2023	General Primary
Treasurer of candidate's authorized committee:	And the second s
The undersigned represents that:	
(1) the payment for the broadcast time requested has been for	urnished by (check one box below):
the candidate listed above who is a legally qualified candidate listed above who is a legal	
(2) this station is authorized to announce the time as paid for	
(3) this station has disclosed its political advertising policies, in and other sales practices (not applicable to federal candidate)	cluding applicable classes and rates discount promotion
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	
Candidate/Committee/Agency	Station Representative
Signature: MCC	Signature:
Name: Voltray Weller	Name: Offmlas B. Casta
Date of Request to Purchase Ad Time: 10-17-23	Date of Station Agreement to Sell Time:

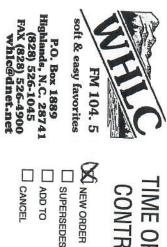
for a duration of at least four seco	that the broadcast matter to does, (2) contains a clearly id ands and a simultaneously dis doast and that the candidate	splayed printed state and/or the candida	o this disclosure either (1) does not refer oh or similar image of the candidate ement identifying the candidate, that te's authorized committee paid for the ndidate that identifies the candidate,		
Candidate/Authorized Comm	ittee/Agency				
Signature:	DNA				
Name:					
Date:	DNB	The Banks have been dearly and the same and			
THE MAN THE WITH	TO BE COMPLETED	BY STATION O	NLY		
Ad submitted to Station?	Yes No		10-17-20		
Note: Must have separate PB-1					
Federal candidate certification sign			TA N/A		
Accepted Accepted IN PART (e.g., accepted – provide reason: *Upload partially accepted form, the					
Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag): Contract #: Station Call Letters:					
Contract #:	Station Call Letters:		Date Received/Requested:		
Est. #:	Station/Location:	os de	Run Start and End Dates:		
purchased or attach separately. If st	(or traffic system print-out) of time purchased, when sation will not upload the act	or other documents spots actually aired,	reflecting this transaction to the OPIF or the rates charged and the classes of time d until an invoice is generated, the name d in the "Terms and Disclosures" folder in		

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TIME ORDER CONTRACT# CONTRACT# ADVERTISER CITY/STATEZIP CONTACT CONTACT CONTACT CONTACT CONTACT PHONE#					FAX#		LITICAL		NATIONAL		LOCAL] snoi	SEDES PREV	SUPER	20	O. Box 15	70
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CONTRACT# ADVERTISER JESS Weller T					STATE/ZIP	CITY					ACCOUNT#		TRAC	CON		I	
	Jour y	Willen	11	6	ADDRESS	ADVE		-23	11-17	1	DATE CONTRACT#		ORD	TIME	S	A STATE OF THE STA	

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charge	s. See Invoice for actual schedule and charges. 501, hereby request station time as follows:
	TE OR LOCAL CANDIDATE
ALL QUESTIONS/BLOC	KS MUST BE COMPLETED
Candidate name: [ACRC T. W. CSO 1	
Authorized committee:	Town Conussivi
Agency requesting time (and contact information):	Comunication Communication Com
Candidate's political party:	
Office sought (no acronyms or abbreviations):	a SSoo far
Nov. 7 m	General Primary
Treasurer of candidate's authorized committee:	
The undersigned represents that: (1) the payment for the broadcast time requested has been full	rnished by (check one box below):
the eandidate listed above who is a legally qualified candithe authorized committee of the legally qualified candi	ndidate, or
(2) this station is authorized to announce the time as paid for b	y such person or entity; and
(3) this station has disclosed its political advertising policies, including and other sales practices (not applicable to federal candida	tes).
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY
Candidate/Committee/Agency	Station Representative
Signature: x Zachul T. WII 6	Signature:
Name: Rachel T. Wilson	Name: Charles B. Coo fa
Date of Request to Purchase Ad Time:	Date of Station Assessment - C. II T.

for a duration of at least four second the candidate approved the broadca	at the broadcast matter to be aire es, (2) contains a clearly identifiable is and a simultaneously displayed ast and that the candidate and/or contains a personal audio statement	d pursuant to this disclosure either (1) does not refer le photograph or similar image of the candidate printed statement identifying the candidate, that the candidate's authorized committee paid for the ent by the candidate that identifies the candidate, dcast.
Candidate/Authorized Committe	ee/Agency	
Signature:	DNA	
Name:		
Date:	DNA	
	TO BE COMPLETED BY ST	TATION ONLY
Ad submitted to Station?		
	forms for each version of the	ad received: 10 - 24-25 ad (i.e., for every ad with differing copy).
		id (i.e., for every ad with differing copy).
Federal candidate certification signed	(above): Yes	No N/A
Accepted Accepted IN PART (e.g., ad co	opy not yet received to determine	e sponsor ID)*
*Upload partially accepted form, then	promptly upload updated final fo	orm when complete.
Date and nature of follow-ups, if any (e	e.g., insufficient sponsor ID tag):	
Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station location:	AC Run Start and End Dates:
ourchased or attach separately. If static	on will not upload the actual time	documents reflecting this transaction to the OPIF or tually aired, the rates charged and the classes of time is spots aired until an invoice is generated, the name lid be placed in the "Terms and Disclosures" folder in



TIME ORDER CONTR.

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	NTRACT#

ADVERTISER -//

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who	COMPETING PRODUCT_				
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	CITY/STATE/ZIP_				
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828-	PHONE#_	☐ REGIONAL	AGENCY	DIRECT	NEW ORDER
unch	CONTACT]	Í	≰
Mel	_ CITY/STATE/ZIP_			ACCOUNT#	CONTRACT
13/	ADDRESS			CONTRACT#	וועוב טקטבא

CANCEL ADD TO

The parties to this advertising agreement, affirm that nothing in the agreement, or any of the actions,

C.B. Cooper

NOTES

AUTHORIZED BY

JANUARY benefits and obligations relating to it, discriminate in any way on the basis of race or ethnicity. FEBRUARY START DAYPART MARCH END APRIL 3 MAY **BROADCAST PATTERN** JUNE AILL AUGUST #SPOTS FLIGHT WEEK SEPTEMBER OCTOBER DATES NOVEMBER DECEMBER 00 LENGTH RATE CONTRACT TOTAL # OF BROADCASTS CART# PRODUCT **EXTRA COMMENT** TOTAL

SIGNATURE

DATE

10/24/23

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charge	s. See Invoice for actual schedule and charges.
1. JOHN M DOTE	hereby request station time as follows:
	, hereby request station time as follows:
IDENTIFY CANDIDATE TYPE	DERAL CANDIDATE
STA	TE OR LOCAL CANDIDATE
	KS MUST BE COMPLETED
Candidate name:	7 -5
Authorized committee:	101301
Authorized committee:	DA J BUT DOME DA
Agency requesting time (and contact information):	THE DOISON
N/A	
Candidate's political party:	
Office sought (no acronyms or abbreviations): Date of election:	coron Nov 7TH
Office sought (no acronyms or abbreviations):	1
Date of election:	MEUSO JEFT
NW. 17- 2023	General Primary
Treasurer of candidate's authorized committee:	
JOHN M. DOTS	ON
The undersigned represents that:	
(1) the payment for the broadcast time requested has been fu	rnished by (check one box below):
the candidate listed above who is a legally qualified ca	
the authorized committee of the legally qualified cand	
(2) this station is authorized to announce the time as paid for t	by such person or entity; and
(3) this station has disclosed its political advertising policies, in and other sales practices (not applicable to federal candida	cluding applicable classes and rates, discount, promotion tes).
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC	500
IN THE PLACEMENT OF ADVERTISING.	MINIMATION ON THE BASIS OF RACE OR ETHNICITY
Candidate/Committee/Agency	Charles D
Signature:	Station Representative
A Jhan. Atoo	Signature:
Dieme: John M. Daton	Name Opela B. Cook - President
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time:

for a duration of at least four second the candidate approved the broad	that the broadcast matter to I does, (2) contains a clearly ide ands and a simultaneously disp doast and that the candidate a	played printed state and/or the candidates	o this disclosure either (1) does not refer oh or similar image of the candidate ement identifying the candidate, that te's authorized committee paid for the ndidate that identifies the candidate,
Candidate/Authorized Comm	nittee/Agency		
Signature:	020	and the same of th	
Name:			
Date:			
	TO BE COMPLETED	BY STATION O	NIY
Ad submitted to Station?			10-17-23
Note: Must have separate PB-1	9 Forms for each version o	f the ad (i.e., for	every ad with differing and
			every and with differing copy),
Federal candidate certification sign	ned (above): Yes	No	LAHA
Disposition:			
Accepted			
Rejected – provide reason	d copy not yet received to de	termine sponsor ID)*
rejected – provide reason			
*Upload partially accepted form, th	sen promptly upload updated	E-15-1	
The state of the s	en promptly upload updated	tinal form when co	omplete.
Date and nature of follow-ups, if ar	y (e.g., insufficient sponsor ID	tag):	
Contract #:	Station Call Letters:		Date Received/Requested:
Est. #:	Station, Location:	the state of the s	Run Start and End Dates:
purchased or attach separately. If st	(or traffic system print-out) or le of time purchased, when sp	ots actually aired,	reflecting this transaction to the OPIF or the rates charged and the classes of time d until an invoice is generated, the name d in the "Terms and Disclosures" folder in