ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

, Michael De Dios

, hereby request station time as follows: See Order for proposed

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

Check one:

Ad "communicates a message relating to any political matter of national importance" by referring to (1) a legally qualified candidate for federal office; (2) an election to federal office; (3) a national legislative issue of public importance (e.g., health care legislation, IRS tax code, etc.); or (4) a political issue that is the subject of controversy or discussion at the national level.



Ad does NOT communicate a message relating to any political matter of national importance (e.g., relates only to a state or local issue).

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Station time requested by:			
Agency name: Greenstripe Media	Inc		
Address: 424 Old Newport Blvd. N	ewport Beach, CA 92663		
Contact: Michael De Dios	Phone number: 949-650-5081	Email: mike@greenstripemedia.com	
Name of advertiser/sponsor (list committees] with no acronyms;	entity's full legal name as disclosed to the name must match the sponsorship ID in ad	e Federal Election Commission [for federal J):	
Name: Union of American Physicia	ans and Dentists		
Address: 520 Capital Mall. Suite 22	20 Sacramento, CA 95814		
Contact:	Phone number: 916-442-6977	Email: uapd@uapd.com	
Station is authorized to announ	ce the time as paid for by such person or e	entity.	
executive committee and board	nsor represents that those listed above are the of directors or other governing group(s). te(s) or federal election, list ALL of the follo		
Name(s) of every candidate refe	erred to:		
Office(s) sought by such candid	ate(s) (no acronyms or abbreviations):		
Date of election:			
Clearly identify EVERY political ad (no acronyms); use separate	matter of national importance referred to page if necessary:	in the 🖌 N/A	

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

Advertiser/Sponsor		Station Representative		
Signature: MM/1/2		Signature: Michelle Frank		
Name: Michael De Dios		Name: Michelle Frank		
Date of Request to Purchase Ad Time: 8/4/23		Date of Stati	ion Agreement to Sell Time: 8/4/23	
TO BE COMPLETED BY STATION ONLY				
Ad submitted to station? X Yes		Date ad rece		
Note: Must have separate PB-19 forms (or the equivalent, e.g., addendums) for each version of the ad (i.e., for every ad with differing copy). If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.				
Disposition: X Accepted Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason (optional): *Upload partially accepted form, then promptly upload updated final form when complete.				
Date and nature of follow-ups, if any:				
Contract #: 1709992179	Station Call Letters:	KFBK-AM/FM	Date Received/Requested: 08/04/2023	
Est. #:	Station Location: S	ACRAMENTO	Run Start and End Dates: 08/14/2023 - 08/20/2023	
For national issue ads only (not required for state/local issue ads).				
Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.