

## AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

<b>Station and Location:</b> <span style="font-size: 1.2em; margin-left: 40px;">WECT-TV      Wilmington, NC</span>	<b>Date:</b> <span style="font-size: 1.2em; margin-left: 20px;">6-14-18</span>
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I, Dudley Media  
do hereby request station time concerning the following issue:

<span style="font-size: 1.2em;">NC SHD #19</span> <span style="font-size: 1.2em;">NC SHD #20</span> <span style="font-size: 1.2em;">NC SSD #9</span>	
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Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
<span style="font-size: 2em;">6/26/18 - 7/30/18</span>  <span style="font-size: 1.5em;">Total Gross - \$50,625.<sup>00</sup></span>					

This broadcast time will be used by: NC Common Ground

**THIS PAGE MUST BE COMPLETED FOR PROGRAMMING THAT  
DOES NOT "COMMUNICATE A POLITICAL MATTER OF NATIONAL  
IMPORTANCE"**

I represent that the payment for the above described broadcast time has been furnished  
by (name and address):

NC Common Ground P.O. Box 1093 Raleigh, NC 27602
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and you are authorized to announce the time as paid for by such person or entity  
(hereinafter referred to as the "sponsor").

List the chief executive officers or members of the executive committee or the board of  
directors below (or attach separately):

Treasurer: Michael Weisel
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**TO BE COMPLETED FOR ALL ISSUE ADVERTISEMENTS**

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

The Sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), the sponsor also agrees to prepare a script, transcript, or tape, which will be delivered to the station at least \_\_\_\_\_ before the time of the scheduled broadcasts.

**TO BE SIGNED BY ISSUE ADVERTISER (SPONSOR)**

6-14-16      [Signature]      215-923-8914  
Date      Signature      Contact Phone Number

**TO BE SIGNED BY STATION REPRESENTATIVE**

<input checked="" type="checkbox"/> <b>Accepted</b>	<input type="checkbox"/> <b>Accepted in Part</b>	<input type="checkbox"/> <b>Rejected</b>
<u>Eileen Stannetti</u> Signature	<u>Eileen Stannetti</u> Printed Name	<u>ASM</u> Title