



Political Broadcast Agreement Form for Non-Candidate/Issue Advertisements (PB-19)



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This form may serve as a model agreement for the sale of political broadcast advertising time and to facilitate compliance with the Federal Communications Commission's (FCC) record retention requirements. Broadcasters seeking information on how the FCC's political broadcast rules and record retention requirements apply to their specific circumstances should seek the advice of their own attorney.

Please note:

You will be prompted to save this form after each entry of your electronic signature. Make sure to re-save the form if you enter any information after entering your electronic signature.

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A companion to this form is NAB's Political Broadcast Catechism. To assist with your understanding of the political advertising rules, an all-new Political Advertising Primer course will become available via Broadcast Education in March 2020.

Broadcast Education is NAB's home for online educational offerings, including live and on-demand webcasts, podcasts and certificate courses. For more information, visit [education.nab.org](https://www.nab.org/education).

NAB members have access to an array of member tools and benefits. To access additional member tools, please visit [nab.org/MemberTools](https://www.nab.org/MemberTools).

ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

I, Cara Noel, 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: 1199SEIU United Healthcare Workers East

Agency name: 1199SEIU United Healthcare Workers East

Address: 498 Seventh Ave., New York, NY 10018

Contact: Cara Noel

Phone number: 646-617-7844

Email: cara.noel@1199.org

Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission [for federal committees] with no acronyms; name must match the sponsorship ID in ad):

Name: 1199SEIU United Healthcare Workers East

Address: 498 Seventh Ave. New York, NY 10018

Contact: Cara Noel

Phone number: 646-617-7844

Email: cara.noel@1199.org

Station is authorized to announce the time as paid for by such person or entity.

List ALL of the chief executive officers or members of the executive committee or board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary.):

George Gresham - President
 Maria Castaneda - Secretary Treasurer
 Yvonne Armstrong - Senior Executive Vice President for Long Term Care
 Veronica Turner-Biggs - Senior Executive Vice President for Downstate (NY) Health Systems

By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).

If ad refers to a federal candidate(s) or federal election, list ALL of the following:

N/A

Name(s) of every candidate referred to:

Office(s) sought by such candidate(s) (no acronyms or abbreviations):

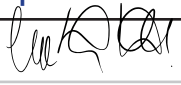

Date of election:

Clearly identify **EVERY** political matter of national importance referred to in the ad (no acronyms); use separate page if necessary:

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: 	Signature: 
Name: Cara D. Noel	Name: Doug Catalanello
Date of Request to Purchase Ad Time: 11/12/21	Date of Station Agreement to Sell Time: 11/12/2021

TO BE COMPLETED BY STATION ONLY

Ad submitted to station? Yes No Date ad received: 11/12/2021

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:

- 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 #: 1986499	Station Call Letters: WINS-AM and WNEW-FM HD3	Date Received/Requested: 11/12/2021
Est. #:	Station Location: New York, NY	Run Start and End Dates: 11/13/2021-11/17/2021

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.

ORDER

Orders
Order / Rev: 1986499
 Alt Order #: _____
 Product Desc: 1199SEIU
 Estimate: _____
 Flight Dates: 11/13/21 - 11/17/21
 Original Date / Rev: 11/12/21 / 11/12/21
 Order Type: GENERAL

New York WINS-AM
 Primary AE: Susan Sharaby
 Sales Office: L-NY
 Sales Region: Local

Agency
Name: 1199SEIU United Healthcare Workers
 Buying Contact: _____
 Billing Contact: _____
330 W 42nd Street 7th Floor
New York, NY 10036

Billing Type: Cash
 Billing Calendar: Broadcast
 Billing Cycle: EOM/EOC
 Agency Commission: 0%

Advertiser
Name: 1199SEIU United Healthcare Workers
 Demographic: M25-54
 Product Codes: Hospitals/Clinics
 Revenue Code 1: DIR
 Revenue Code 2: GEN
 Revenue Code 3: GEN
 Priority: FULL

New Business Thru: _____
 Advertiser External ID: 1000062
 Agency External ID: 4000048
 Unit Code: General
 Order Separation: 00:45:00

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
11/01/21	11/17/21	14	\$5,458.00	\$5,458.00

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
November 2021	14	\$5,458.00	\$5,458.00	0.00
Totals	14	\$5,458.00	\$5,458.00	0.00

Account Executives

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Susan Sharaby	L-NY	Local	Start Of Order - End Of Order	100%

Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	Spots	Amount
N 1	WINS	11/15/21	11/17/21	M-F 6a-10a M-F 6a-10a	CM	6a-10a	MTW----	:30	2	\$707.00	FULL	0.00	NM	2	\$1,414.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>					
		Week: 11/15/21	11/21/21	MTW----		2		\$707.00		0.00					
N 2	WINS	11/15/21	11/16/21	M-F 10a-3p M-F 10a-3p	CM	10a-3p	MT-----	:30	2	\$405.00	FULL	0.00	NM	2	\$810.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>					
		Week: 11/15/21	11/21/21	MT-----		2		\$405.00		0.00					
N 3	WINS	11/17/21	11/17/21	M-F 10a-3p 10:00 AM-12:00 PM	CM	10:00 AM-12:00 PM (10:00 AM-12:00 PM)	PI--w----	:30	1	\$405.00	FULL	0.00	NM	1	\$405.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>					
		Week: 11/15/21	11/21/21	--w----		1		\$405.00		0.00					
N 4	WINS	11/15/21	11/16/21	M-F 3p-7p M-F 3p-7p	CM	3p-7p	MT-----	:30	3	\$433.00	FULL	0.00	NM	3	\$1,299.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>					
		Week: 11/15/21	11/21/21	MT-----		3		\$433.00		0.00					
N 5	WINS	11/13/21	11/14/21	Sa-Su ROS 6:00 AM-8:00 PM	CM	6:00 AM-8:00 PM (6:00 AM-8:00 PM)	-----SS	:30	6	\$255.00	FULL	0.00	NM	6	\$1,530.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>		<u>Rate</u>		<u>Rating</u>					

Order / Rev: 1986499
 Alt Order #:
 Flight Dates: 11/13/21 - 11/17/21

Advertiser: 1199SEIU United Healthcare Workers (E
 Product Desc: 1199SEIU
 Estimate:

New York WINS-AM

Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	Spots	Amount
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		Week: 11/08/21	11/14/21	-----SS		6				\$255.00		0.00			
													Totals	14	\$5,458.00