

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

FEDERAL CANDIDATE

STATE/LOCAL CANDIDATE

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

<b>Station and Location:</b> <u>KNEK-FM - Lafayette, LA</u>	<b>Date:</b> <u>10/2/19</u>
--	--------------------------------

I, Smart Media Group

being/on behalf of: Tim Temple

a legally qualified candidate of the Republican

political party for the office of: Louisiana Insurance Commissioner

in the primary

election to be held on: November 12, 2019

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
SEE ATTACHED					

**Attach proposed schedule with charges (if available):**

I represent that the payment for the above described broadcast time has been furnished by:

Temple for Insurance Commissioner, Louisiana

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Tim Temple

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

***To Be Signed By Candidate or Authorized Committee***

7/1/19

Date

Signature

***To Be Signed By Station Representative***

Accepted

Accepted in Part

Rejected

Signature

Sylvia Whiting  
Printed Name

National/Local Sales  
Title Assistant

## FEDERAL CANDIDATE CERTIFICATION

**In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:**

I, \_\_\_\_\_  
(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

does

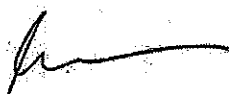
does not

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

the 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.

the television programming 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.



\_\_\_\_\_  
signature of candidate or authorized committee

Smart Media Group

\_\_\_\_\_  
printed name

\_\_\_\_\_  
date

**AGREED UPON SCHEDULE**

**(TO BE FILLED IN ONLY IF STATION DOES NOT ACCEPT ALL OF CANDIDATE'S REQUEST)**

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
<b>SEE ATTACHED</b>					

**Attach proposed schedule with charges (if available):**

**AFTER AIRING OF BROADCASTS:**

Attach invoices or Schedule Run Summary to this Form showing:

- 1) actual air time and charges for each spot;
- 2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- 3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

**Note: Because the FCC requires that the political file contain the actual times the spots air and the rates charged, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired and the rates charged. The FCC's online political files include a folder for "Terms and Disclosures." NAB suggests that, for stations subject to the online public file rule, the names of contact person(s) be placed in that folder.**

REVISED

#270411

Oct 02, 19  
 CONT# 33301827 Mod# 1 Ver# 3 (Last = Orig CF)  
 REP Cumulus Media National Sales  
 TO KNEK-FM (Lafayette, LA)  
 FM BRIAN DONLEY  
 OFF PHILADELPHIA  
 AGY Katz Media Group  
 ADDR 125 West 55th Street 3rd Floor  
 New York, NY 10019

DDS CONT# 0  
 C/P/E: na / na / 930C0U

SALESPERSON FAX#

PH #

BYR Helen Hanratty  
 ADV TIM TEMPLE FOR INSURANCE COMMISSIONER  
 PDT Temple for LA State Insurance  
 FLT Sep 30, 19 - Oct 06, 19

OCT 02 2019

*Handwritten signature and date: 10/15/19*

\* REP ORDER COMMENT \*

\*\* 10/2/2019 1:42:00 PM: THE SCHEDULE HAS BEEN REVISED UPDATING THE RATES TO CURRENT PRICING. SPOTS ORDERED FOR TU-WED HAVE BEEN SHIFTED INTO FRI. ADDITIONAL PROOF OF PAYMENT WILL BE ISSUED ASAP.

\*\* 10/2/2019 1:42:00 PM: THIS IS A KATZ MEDIA GROUP ORDER. ALL BILLING SHOULD BE SENT TO KATZ MEDIA GROUP 125 W 55TH ST.NY,NY 10019. KATZ MEDIA GROUP IS NOT LIABLE FOR PAYMENT.

\*\* 10/2/2019 1:42:00 PM: THIS IS A REVISED ISSUE/POLITICAL ORDER. PLEASE NOTE THERE IS A 24 HOUR CANCELLATION POLICY ON ALL ISSUE/POLITICAL ORDERS. PLEASE CONFIRM WITH ANGELA.HOMAN@KATZMEDIA.COM OR CALL 215-557-4230. THANK YOU!

MC	LN	DAYS	TIME	LEN	EFFECTIVE DATES	# OF Day	NPD	RATE	TOT SPTS
<b>FLIGHT 1</b>									
CHG	1.1	.T.....	6A - 10A	60	10/01/2019 - 10/01/2019	1D	0	\$55.00	0
CHG	1.2	.T.....	10A - 3P	60	10/01/2019 - 10/01/2019	1D	0	\$55.00	0
CHG	1.3	.T.....	3P - 7P	60	10/01/2019 - 10/01/2019	1D	0	\$55.00	0
<b>** FLIGHT TOTALS **</b>							0	\$0.00	
<b>FLIGHT 2</b>									
CHG	2.1	..W....	6A - 10A	60	10/02/2019 - 10/02/2019	1D	0	\$55.00	0
CHG	2.2	..W....	10A - 3P	60	10/02/2019 - 10/02/2019	1D	0	\$55.00	0
CHG	2.3	..W....	3P - 7P	60	10/02/2019 - 10/02/2019	1D	0	\$55.00	0
<b>** FLIGHT TOTALS **</b>							0	\$0.00	
<b>FLIGHT 3</b>									
CHG	3.1	...T...	6A - 10A	60	10/03/2019 - 10/03/2019	1D	1	\$55.00	1
CHG	3.2	...T...	10A - 3P	60	10/03/2019 - 10/03/2019	1D	1	\$55.00	1
CHG	3.3	...T...	3P - 7P	60	10/03/2019 - 10/03/2019	1D	1	\$55.00	1
<b>** FLIGHT TOTALS **</b>							3	\$165.00	
<b>FLIGHT 4</b>									
CHG	4.1	....F..	6A - 10A	60	10/04/2019 - 10/04/2019	1D	2	\$55.00	2

Oct 02, 19  
 CONT# 33301827 Mod# 1 Ver# 3 (Last = Orig CF)  
 REP Cumulus Media National Sales

DDS CONT# 0  
 C/P/E: na / na / 930C0U

CHG	4.2	....F..	10A - 3P	60	10/04/2019 - 10/04/2019	1D	2	\$55.00	2	
CHG	4.3	....F..	3P - 7P	60	10/04/2019 - 10/04/2019	1D	2	\$55.00	2	
** FLIGHT TOTALS **								6	\$330.00	

	<b>Oct 19</b>								
SPOTS	9								
CASH	495.00								
TRADE	0.00								
NSL	0.00								
TOTAL	495.00								

								<b>TOTAL</b>	
SPOTS								9	
CASH								495.00	
TRADE								0.00	
NSL								0.00	
TOTAL								495.00	

**\*\* Competitive Comments \*\***

TIM TEMPLE FOR INSURANCE COMMISSIONER  
 SVC: SP19 MSA ARB  
 Demo Adults 35+

Nondiscrimination -Paragraphs 49 and 50 of the United States Federal Communications Commission's Report and Order No. 07-217 provides that broadcast stations' advertising contracts will not discriminate on the basis of race or ethnicity, and must contain nondiscrimination clauses. Consistent with this order, Katz Communications, Inc. (including any subsidiary or division of Katz) does not discriminate in any broadcast advertising contract on the basis of race or ethnicity and evaluates, negotiates and completes its broadcast advertising contracts without regard to race or ethnicity.

# ORDER

Orders	Order / Rev: <u>270411</u>		
	Alt Order #: <u>33301827</u>		
	Product Desc: <u>Temple for LA State Insurance</u>		
	Estimate: <u>930C0U</u>		KNEK-AM/FM
	Flight Dates: <u>10/03/19 - 10/04/19</u>	Primary AE: <u>Katz New York</u>	
	Original Date / Rev: <u>10/02/19 / 10/02/19</u>	Sales Office: <u>K-7.5</u>	
	Order Type: <u>GENERAL</u>	Sales Region: <u>N-Katz75</u>	

Agency	Name: <u>Katz Media Group</u>		
	Buying Contact: _____	Billing Type: <u>Cash</u>	
	Billing Contact: _____	Billing Calendar: <u>Broadcast</u>	
	<u>125 West 55th Street</u>	Billing Cycle: <u>EOM/EOC</u>	
	<u>New York, NY 10019</u>	Agency Commission: <u>15%</u>	

Advertiser	Name: <u>Temple/R/Insurance Commissioner</u>		
	Demographic: <u>A35+</u>	New Business Thru: _____	
	Product Codes: <u>Candidates</u>	Advertiser External ID: _____	
	Revenue Code 1: <u>AGY-AVAIL</u>	Agency External ID: _____	
	Revenue Code 2: <u>POL-CAND</u>	Unit Code: <u>General</u>	
	Revenue Code 3: <u>POL-STATE</u>		

Start Date	End Date	# Spots	Gross Amount	Net Amount
09/30/19	10/04/19	9	\$495.00	\$420.75

Month	# Spots	Gross Amount	Net Amount	Rating
October 2019	9	\$495.00	\$420.75	0.00
<b>Totals</b>	<b>9</b>	<b>\$495.00</b>	<b>\$420.75</b>	<b>0.00</b>

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Katz New York			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	KNEKA	10/03/19	10/04/19	M-F AM Drive M-F	CM		---12--	1:00	3	\$55.00	P-30	0.00	NM	3	\$165.00
		<u>Start Date</u>		<u>End Date</u>	<u>Weekdays</u>	<u>Spots/Week</u>	<u>Rate</u>	<u>Rating</u>							
		09/30/19	10/06/19	---12--	3	\$55.00	0.00								
N 2	KNEKA	10/03/19	10/04/19	M-F Midday M-F	CM		---12--	1:00	3	\$55.00	P-30	0.00	NM	3	\$165.00
		<u>Start Date</u>		<u>End Date</u>	<u>Weekdays</u>	<u>Spots/Week</u>	<u>Rate</u>	<u>Rating</u>							
		09/30/19	10/06/19	---12--	3	\$55.00	0.00								
N 3	KNEKA	10/03/19	10/04/19	M-F PM Drive M-F	CM		---12--	1:00	3	\$55.00	P-30	0.00	NM	3	\$165.00
		<u>Start Date</u>		<u>End Date</u>	<u>Weekdays</u>	<u>Spots/Week</u>	<u>Rate</u>	<u>Rating</u>							
		09/30/19	10/06/19	---12--	3	\$55.00	0.00								
<b>Totals</b>													<b>9</b>	<b>\$495.00</b>	