

DUPLICATE INVOICE



KNEK-AM/FM
 202 Galbert
 Lafayette, LA 70506
 Main: (337) 232-1311
 Billing:

Property	KNEK-FM		
Invoice #	BB2130356	Order #	240555
Invoice Date	09/05/19	Alt Order #	33197790
Invoice Month	September 2019	Deal #	
Invoice Period	08/26/19 - 09/05/19	Flight Dates	09/04/19 - 09/05/19
Advertiser	Temple/R/Insurance Commissioner		
Product	Temple for Insurance Commissioner		
Estimate #	90290U		
Account Executive	Katz New York		
Sales Office	Katz-7.5%		
Sales Region	National Katz 7.5%		
Agency Code	RI13287		
Advertiser Code	na		
Billing Calendar	Broadcast		
Billing Type	Cash		
Special Handling			
Agency Ref			
Advertiser Ref			
Product 1	na		
Product 2			

Billing Address:

Katz Media Group
 Attention: Accounts Payable
 125 West 55th Street
 3rd Floor
 New York, NY 10019

Send Payment To:

KNEK-AM/FM
 Cumulus Media- Lafayette
 3642 Momentum Place
 Chicago, IL 60689-5336

Line	Start Date	End Date	Description	Start/End Time	MTWTFSS	Length	Spots/Week	Rate	Type																																																																
1	09/04/19	09/05/19	M-F	6:00 AM-10:00 AM	--21---	1:00	3	\$50.00	NM																																																																
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Total Spots							9																																																																		

Due and Payable upon receipt

<u>Gross Total</u>	\$450.00
<u>Agency Commission</u>	\$67.50
<u>Net Amount Due</u>	\$382.50

Invoice Balance as of 09/12/19 2:23:34 PM CT **\$382.50**

ORDER

Orders
Order / Rev: 240555
Alt Order #: 33197790
Product Desc: Temple for Insurance Commissioner
Estimate: 90290U
Flight Dates: 09/04/19 - 09/05/19
Original Date / Rev: 08/27/19 / 08/30/19
Order Type: GENERAL
Primary AE: KNEK-AM/FM
Sales Office: Katz New York
Sales Region: K-7.5
Sales Region: N-Katz75

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

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

Bill Plan

Totals

Start Date	End Date	# Spots	Gross Amount	Net Amount
08/26/19	09/05/19	9	\$450.00	\$382.50

Month	# Spots	Gross Amount	Net Amount	Rating
September 2019	9	\$450.00	\$382.50	0.00
Totals	9	\$450.00	\$382.50	0.00

Account Executives

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	09/04/19	09/05/19	M-F AM Drive M-F	CM	6:00 AM-10:00 AM	--21---	1:00	3	\$50.00	P-30	0.00	NM	3	\$150.00
		<u>Start Date</u> <u>End Date</u>		<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		09/02/19	09/08/19	--21---		3				\$50.00		0.00			
N 2	KNEKA	09/04/19	09/05/19	M-F Midday M-F	CM	10:00 AM-3:00 PM	--21---	1:00	3	\$50.00	P-30	0.00	NM	3	\$150.00
		<u>Start Date</u> <u>End Date</u>		<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		09/02/19	09/08/19	--21---		3				\$50.00		0.00			
N 3	KNEKA	09/04/19	09/05/19	M-F PM Drive M-F	CM	3:00 PM-7:00 PM	--21---	1:00	3	\$50.00	P-30	0.00	NM	3	\$150.00
		<u>Start Date</u> <u>End Date</u>		<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		09/02/19	09/08/19	--21---		3				\$50.00		0.00			
													Totals	9	\$450.00

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

Station and Location: <i>Knek-FM / Lafayette, LA</i>	Date: <i>8/29/19</i>
--	--------------------------------

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

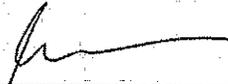
This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

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

7/11/19

Date



Signature

To Be Signed By Station Representative

Accepted

Accepted in Part

Rejected


Signature

Sylvia Whiting
Printed Name

Financial/National
Title assist.

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

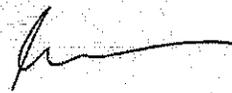
does not

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
SEE ATTACHED					

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.

(TO BE COMPLETED BY STATION REPRESENTATIVE RESPONDING TO THE INQUIRY)

INSTRUCTIONS: This form must be completed as to all requests, both oral and written, for broadcast time to be used by or on behalf of (1) a candidate for public office or (2) persons who wish to communicate a message relating to "any political matter of national importance," as defined in the Bipartisan Campaign Reform Act of 2002. It is to be kept in the Station Public File for a period of two years.

STATION KNEK

DATE OF REQUEST: 8/29/19

INQUIRY MADE BY: Smart media Group

AGENCY (if any): Katz Media Group

ADDRESS OF AGENCY: 125 West 55th St 3rd Flr.

CITY, STATE, ZIP OF AGENCY: New York, NY 10019

TELEPHONE NUMBER OF AGENCY:

CANDIDATE: Tim Temple

ORGANIZATION OR SPONSORING AUTHORITY (WHO WILL PAY):

IF SPONSOR IS A COMMITTEE, NAME OF COMMITTEE:

ADDRESS OF COMMITTEE:

CITY, STATE, ZIP OF COMMITTEE:

TELEPHONE NUMBER OF COMMITTEE:

COMMITTEE OFFICERS:

Chairman:

Vice Chairman:

Treasurer:

Secretary:

Is this the Candidate's Authorized Committee? () yes () no

OFFICE SOUGHT: PARTY AFFILIATION:

() federal () state local

ELECTION AND DATE:

primary () general

FOR ISSUE ADS ONLY:

- a. Candidate(s) and offices (if any) referred to: _____

- b. Federal election(s) (if any) referred to: _____
- c. Issue(s) discussed: _____
- d. Name, Address, Phone Number of Contact: _____

DATES REQUESTED: _____

LENGTH OF SPOT/PROGRAM TIME REQUESTED: _____

REQUEST MADE:

in writing () orally
If request is made in writing, attach and retain.

STATION OFFER: _____

DISPOSITION OF REQUEST:

granted () denied
If not granted, state reasons in space below. If denied in writing, attach and retain. If granted, attach contract and invoice, when available.

REQUEST FOR DOCUMENTATION THAT CANDIDATE IS LEGALLY QUALIFIED:

() yes () no
Attach any written documentation received.

DATE POLITICAL DISCLOSURE FORM SUBMITTED TO REQUESTOR: _____

COMMENTS

STATION REP	<i>[Signature]</i>
REVIEWED	<i>Yes</i>

REVISED

#240555

Aug 28, 19
 CONT# 33197790 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 / 90290U

SALESPERSON FAX#

PH #

BYR Helen Hanratty
 ADV TIM TEMPLE FOR INSURANCE COMMISSIONER
 PDT Temple for Insurance Commissioner
 FLT Sep 02, 19 - Sep 08, 19

AUG 27 2019

ENTERED AUG 28 2019

* REP ORDER COMMENT *

** 8/28/2019 9:52:00 AM: 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.

** 8/28/2019 9:52:00 AM: 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
FLIGHT 1									
CHG	1.1	.T.....	6A - 10A	60	09/03/2019 - 09/03/2019	1D	1	\$50.00	1
CHG	1.2	.T.....	10A - 3P	60	09/03/2019 - 09/03/2019	1D	1	\$50.00	1
CHG	1.3	.T.....	3P - 7P	60	09/03/2019 - 09/03/2019	1D	1	\$50.00	1
** FLIGHT TOTALS **							3	\$150.00	
FLIGHT 2									
CHG	2.1	..W....	6A - 10A	60	09/04/2019 - 09/04/2019	1D	1	\$50.00	1
CHG	2.2	..W....	10A - 3P	60	09/04/2019 - 09/04/2019	1D	1	\$50.00	1
CHG	2.3	..W....	3P - 7P	60	09/04/2019 - 09/04/2019	1D	1	\$50.00	1
** FLIGHT TOTALS **							3	\$150.00	
FLIGHT 3									
CHG	3.1	...T...	6A - 10A	60	09/05/2019 - 09/05/2019	1D	1	\$50.00	1
CHG	3.2	...T...	10A - 3P	60	09/05/2019 - 09/05/2019	1D	1	\$50.00	1
CHG	3.3	...T...	3P - 7P	60	09/05/2019 - 09/05/2019	1D	1	\$50.00	1
** FLIGHT TOTALS **							3	\$150.00	

start on 9/4 delay per KATZ per first 2

Aug 28, 19
 CONT# 33197790 Mod# 1 Ver# 3 (Last = Orig CF)
 REP Cumulus Media National Sales

DDS CONT# 0
 C/P/E: na / na / 90290U

	Sep 19					
SPOTS	9					
CASH	450.00					
TRADE	0.00					
NSL	0.00					
TOTAL	450.00					

						TOTAL
SPOTS						9
CASH						450.00
TRADE						0.00
NSL						0.00
TOTAL						450.00

**** 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.

Aug 27, 19
 CONT# 33197790 Mod# Ver# 1 (Last =)
 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

Republican
240555

DDS CONT# 0
 C/P/E: na / na / 90290U

SALESPERSON FAX# AUG 27 2019

PH #

BYR Helen Hanratty
 ADV TIM TEMPLE FOR INSURANCE COMMISSIONER
 PDT Temple for Insurance Commissioner
 FLT Sep 02, 19 - Sep 08, 19

P30
AWO 4/20 PM

* REP ORDER COMMENT *

** 8/26/2019 10:53:00 AM: DEL RAY/SMART MEDIA/DEL CIELO: THIS ORDER WAS PAID TO KATZ CIA VIA CREDIT CARD - WHEN AN AGENCY PAYS KATZ MEDIA VIA CREDIT CARD, THERE IS A CUSTOMARY CREDIT CARD CHARGE ASSOCIATED WITH THE PAYMENT WHICH WILL BE CHARGED BACK TO THE STATIONS. PLEASE NOTE THERE IS A 24 HOUR CANCELLATION POLICY WITH ALL POLITICAL/ISSUE ORDERS. PLEASE CONFIRM IN THE SYSTEM.

** 8/26/2019 10:53:00 AM: 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.

** 8/26/2019 10:53:00 AM: THIS IS A NEW 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	
		FLIGHT 1								
	1.1	.T.....	6A - 10A	60	09/03/2019 - 09/03/2019	1D	1	\$45.00	1	
	1.2	.T.....	10A - 3P	60	09/03/2019 - 09/03/2019	1D	1	\$45.00	1	
	1.3	.T.....	3P - 7P	60	09/03/2019 - 09/03/2019	1D	1	\$45.00	1	
			** FLIGHT TOTALS **					3	\$135.00	
		FLIGHT 2								
	2.1	..W....	6A - 10A	60	09/04/2019 - 09/04/2019	1D	1	\$45.00	1	
	2.2	..W....	10A - 3P	60	09/04/2019 - 09/04/2019	1D	1	\$45.00	1	
	2.3	..W....	3P - 7P	60	09/04/2019 - 09/04/2019	1D	1	\$45.00	1	
			** FLIGHT TOTALS **					3	\$135.00	
		FLIGHT 3								
	3.1	...T...	6A - 10A	60	09/05/2019 - 09/05/2019	1D	1	\$45.00	1	
	3.2	...T...	10A - 3P	60	09/05/2019 - 09/05/2019	1D	1	\$45.00	1	
	3.3	...T...	3P - 7P	60	09/05/2019 - 09/05/2019	1D	1	\$45.00	1	
			** FLIGHT TOTALS **					3	\$135.00	

Aug 27, 19

CONT# 33197790 Mod# Ver# 1 (Last =)
REP Cumulus Media National Sales

DDS CONT# 0
C/P/E: na / na / 90290U

	Sep 19					
SPOTS	9					
CASH	405.00					
TRADE	0.00					
NSL	0.00					
TOTAL	405.00					

						TOTAL
SPOTS						9
CASH						405.00
TRADE						0.00
NSL						0.00
TOTAL						405.00

**** Competitive Comments ****

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: 240555
Alt Order #: 33197790
Product Desc: Temple for Insurance Commissioner
Estimate: 90290U
Flight Dates: 09/03/19 - 09/05/19
Original Date / Rev: 08/27/19 / 08/27/19
Order Type: GENERAL
Primary AE: Katz New York
Sales Office: K-7.5
Sales Region: N-Katz75
KNEK-AM/FM

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

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

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
08/26/19	09/05/19	9	\$405.00	\$344.25

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
September 2019	9	\$405.00	\$344.25	0.00
Totals	9	\$405.00	\$344.25	0.00

Account Executives

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	09/03/19	09/05/19	M-F AM Drive M-F	CM	6:00 AM-10:00 AM	-111---	1:00	3	\$45.00	P-30	0.00	NM	3	\$135.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		Week: 09/02/19	09/08/19	-111---		3				\$45.00		0.00			
N 2	KNEKA	09/03/19	09/05/19	M-F Midday M-F	CM	10:00 AM-3:00 PM	-111---	1:00	3	\$45.00	P-30	0.00	NM	3	\$135.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		Week: 09/02/19	09/08/19	-111---		3				\$45.00		0.00			
N 3	KNEKA	09/03/19	09/05/19	M-F PM Drive M-F	CM	3:00 PM-7:00 PM	-111---	1:00	3	\$45.00	P-30	0.00	NM	3	\$135.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
		Week: 09/02/19	09/08/19	-111---		3				\$45.00		0.00			
													Totals	9	\$405.00

Receipt

Katz Communications • Katz Media Group Inc
125 W. 55th St., New York, New York 10019
212-424-6528

Cardholder Contact Information

Cardholder Name: **Kyle Roberts**
Cardholder Phone:
Cardholder Email:
Customer Name: **Smart Media Group, Inc.**

Bill To Address: **1427 Leslie Avenue
Alexandra, Virginia 22301**

Transaction Type

Transaction Type: **Authorize And Capture**
Created Date: **8/29/2019 4:23:16 PM EDT**
Capture Date: **8/29/2019 4:23:17 PM EDT**
AVS Address: **Matched**

Transaction Status: **Submitted**
Authorization Date: **8/29/2019 4:23:17 PM EDT**
Authorization Code: **029200**
AVS Zip: **Matched**

Credit Card Information

Name On Card: **SMART MEDIA GROUP LLC**
Card Number: **xxxx-xxxx-xxxx-9764**
Security Code Response: **Matched**

Card Brand: **MC**
Security Code Status: **Provided**

Tracking Information

Customer Ref Value:
Invoice Number:
Ship From Postal Code: **10019**
Tracking Number:

Order Number:
Invoice Date:
Shipping Company: **None**

Transaction Totals

Product Code	Description	UOM Code	CMDTY Code	QTY	AMT	EXT.AMT
082919-8	Smart Media Group - Tlm Temple for Insurance Commission - 90290U	EA	80140000	1.00	\$4,081.70	\$4,081.70
					Sub-Total:	\$4,081.70
					Sales Tax:	\$0.00
					Freight Amount:	\$0.00
					Freight Tax:	\$0.00
					Duty Amount:	\$0.00
					Total (USD) :	\$4,081.70

This receipt is for informational use only and is not intended to serve as or replace any official tax document.

Katz Communications uses advanced payment processing services provided by WEX Inc. www.wexinc.com
8/29/2019 4:23:28 PM EDT