ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

l,	I,, 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 only to a state or local issue).	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 QUE	STIONS/BLOCKS MUST BE CON	MPLETED							
Station time requested by:									
Agency name:									
Address:									
Contact:	Phone number:	Email:							
Name of advertiser/sponsor (list entity's committees] with no acronyms; name m	full legal name as disclosed to the Fede ust match the sponsorship ID in ad):	ral Election Commission [for federal							
Name:									
Address:									
Contact:	Phone number:	Email:							
station is authorized to announce the ti	me as paid for by such person or entity.								
governing group(s) of the advertiser/sp	ers of the executive committee and the kennsor (Use separate page if necessary.): The executive committee and the kennsor (Use separate page if necessary.):								
executive committee and board of director									
f ad refers to a federal candidate(s) or f	ederal 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 the control of the co	of national importance referred to in the 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: Douglas Catalansllo					
Name:		Name:	V				
Date of Request to Purchase Ad Time:		Date of Station Agr	reement to Sell Time:				
то	BE COMPLETED	BY STATION O	NLY				
Ad submitted to station? Yes	No	Date ad received: _					
Note: Must have separate PB-19 form	s for each version o	of the ad (i.e., for e	very ad with differing copy).				
If only one officer, executive committee in writing if there are any other officers, update this form if additional officers, n	executive committe	ee members or direc					
Disposition: Accepted Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason: *Upload partially accepted form, then promptly upload updated final form when complete.							
Date and nature of follow-ups, if any: Extended Order until 4/19/24							
Contract #: 2659151	Station Call Letters: WINS-AM, WINS-FM an	d WNEW-FM HD3	Date Received/Requested:				
Est. #:	Station Location:		Run Start and End Dates: 2/29/24-4/19/24				

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.

Orders	Order / Rev:	2659151				
	Alt Order #:					
	Product Desc:	LTCAP				
	Estimate:			New York WINS-FM		
	Flight Dates:	02/29/24 - 04/19/24	Primary AE:	Rebecca Levine		
	Original Date / Rev:	04/12/24 / 04/12/24	Sales Office:	L-NY		
	Order Type:	POLITICAL-ISSUE	Sales Region:	Local		
Agency	Name:	Red Horse Strategies				
	Buying Contact:		Billing Type:	Cash		
	Billing Contact:	Matt Rey	Billing Calendar:	Broadcast		
		310 West 43rd Street	Billing Cycle:	EOM/EOC		
		New York, NY 10036	Agency Commission:	0%		
Advertiser	Name:	Long Term Care Advocacy Project				
	Demographic:	M25-54	New Business End:			
	Product Codes:	Issues/Propositions (POL)	Advertiser External ID:	1037789		
	Revenue Code 1:	AGY	Agency External ID:	4042321		
	Revenue Code 2:	POL	Unit Code:	Issue - Local		
	Revenue Code 3:	POL-ISS	Order Separation:	00:45:00		
	Priority:	ISSUE				

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
02/26/24	03/31/24	66	\$58,080.00	\$58,080.00
04/01/24	04/19/24	45	\$39,600.00	\$39,600.00

Totals

Totalo				
Month	# Spots	Gross Amount	Net Amount	Rating
March 2024	66	\$58,080.00	\$58,080.00	0.00
April 2024	45	\$39,600.00	\$39,600.00	0.00
Totals	111	\$97,680.00	\$97,680.00	0.00

Account Executives

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

	Ln	Ch	Start	End	Inventory Code	Break	Start/End	Time Days	Len S _l	oots	Rate Pri Rtg Type	Spots	Amount
	1	WINS	02/29/2	4 03/31/24	M-F 6a-10a	CM	6a-10a	33333	:30	15	\$880.00ISSUI 0.00 NM	66	\$58,080.00
					M-F 6a-10a								
		Sta	rt Date	End Date	<u>Weekdays</u>	Spots/Week	<u>Rate</u>	<u>Rating</u>					
	We	ek: 02/2	26/24	03/03/24	33	6	\$880.00	0.00					
	We	ek: 03/0	04/24	03/10/24	33333	15	\$880.00	0.00					
	We	ek: 03/	11/24	03/17/24	33333	15	\$880.00	0.00					
	We	ek: 03/	18/24	03/24/24	33333	15	\$880.00	0.00					
	We	ek: 03/2	25/24	03/31/24	33333	15	\$880.00	0.00					
_	2	WINS	04/01/2	4 04/12/24	M-F 6a-10a	CM	6a-10a	33333	:30	15	\$880.001SSUI 0.00 NM	30	\$26,400.00
					M-F 6a-10a								
		Sta	rt Date	End Date	Weekdays	Spots/Week	Rate	Rating					
	We	ek: 04/0	01/24	04/07/24	33333	15	\$880.00	0.00					
	We	ek: 04/0	08/24	04/14/24	33333	15	\$880.00	0.00					
_	1 3	WINS	04/15/2	4 04/19/24	M-F 6a-10a	CM	6a-10a	33333	:30	15	\$880.00 ISSUI 0.00 NM	15	\$13,200.00
					M-F 6a-10a						•		
		Sta	rt Date	End Date	Weekdays	Spots/Week	Rate	Rating					
	We	ek: 04/	15/24	04/21/24	33333	15	\$880.00	0.00					
=											T-4-1-	444	#07.000.00