

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:	Date:
------------------------------	--------------

I, Victoria Engelmayer/AKPD Message & Media,
Friends of Mike Solomon
 being/on behalf of: _____,
 a legally qualified candidate of the Democrat
 political party for the office of: Mayor
 in the Primary
 election to be held on: September 9, 2014

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
:30					

Attach proposed schedule with charges (if available):

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

Friends of Mike Solmon, 174 Enfield Ave. Providence, RI 02908

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:

James Scott 401.285.7130

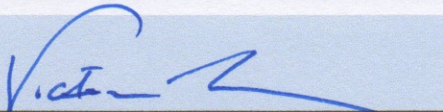
This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

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

8/11/14

Date



Signature

To Be Signed By Station Representative

☐ Accepted

☐ Accepted in Part

☐ Rejected

Signature

Printed Name

Title