




1130176 Parkinson/R/Senate/Katz Media Group WMAL-FM {View}

(Processed: 1)

  Date	Action	Line	Comment	By	Total \$	# Spots	Expected
06/05/24 2:09:43 PM	Cash in Advance Rem		[cleared cash in adv] Paid Katz \$6783 6/5/24	Marty Reuter (MARTY.RE	\$7,980.00	29	0.00
 06/05/24 12:48:13 PM	Processed		<async process>	Jayda Burk (jayda.burk@c	\$7,980.00	29	0.00
06/05/24 12:35:45 PM	Approved			Marty Reuter (MARTY.RE	\$7,980.00	29	0.00
06/05/24 12:35:43 PM	Approval Workflow		[Centralized AR - Business Office Approval Needed Default]	Marty Reuter (MARTY.RE	\$7,980.00	29	0.00
06/05/24 12:32:45 PM	Approval Workflow		[Sales Manager - Ready Default]	Jeffrey Boden (jeffrey.bod	\$7,980.00	29	0.00
06/05/24 12:11:05 PM	Ready for approval		New order readied for approval	Amanda Daymude (Aman	\$7,980.00	29	0.00
06/05/24 12:00:34 PM	New order created		Imported EC Order	Amanda Daymude (Aman	\$7,980.00	29	0.00

[Sorted by: Date]

ORDER

Orders
Order / Rev: 1130176
Alt Order #: 37332972
Product Desc: 2024 Primary Election
Estimate: 7111
Flight Dates: 06/11/24 - 06/24/24
Original Date / Rev: 06/05/24 / 06/05/24
Order Type: GENERAL

WMAL-FM
Primary AE: Katz Dallas
Sales Office: K-7.5
Sales Region: N-Katz75

Agency Name: Katz Media Group
Buying Contact:
Billing Contact: Erica Cooper
 125 West 55th Street
 New York, NY 10019

Billing Type: Cash
Billing Calendar: Broadcast
Billing Cycle: EOM/EOC
Agency Commission: 15%

Advertiser Name: Parkinson/R/Senate
Demographic: A18+
Product Codes: Candidates
Revenue Code 1: AGY-AVAIL
Revenue Code 2: POL-CAND
Revenue Code 3: POL-US SEN
Priority: P-100

New Business End:
Advertiser External ID:
Agency External ID:
Unit Code: General
Order Separation: 00:15:00

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
05/27/24	06/18/24	29	\$7,980.00	\$6,783.00

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
June 2024	29	\$7,980.00	\$6,783.00	0.00
Totals	29	\$7,980.00	\$6,783.00	0.00

Account Executives

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Katz Dallas	K-7.5	N-Katz75	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	WMALF	06/11/24	06/17/24	M-F AM Drive M-F	CM	6:00 AM-10:00 AM	MTWTF--	:30	10	\$300.00	P-30	0.00	NM	10	\$3,000.00
	AM -	<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
	Week:	06/11/24	06/17/24	MTWTF--		10				\$300.00		0.00			
N 2	WMALF	06/18/24	06/24/24	M-F AM Drive M-F	CM	6:00 AM-10:00 AM	-T-----	:30	1	\$300.00	P-30	0.00	NM	1	\$300.00
	AM -	<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
	Week:	06/18/24	06/24/24	-T-----		1				\$300.00		0.00			
N 3	WMALF	06/11/24	06/17/24	M-F Midday M-F	CM	10:00 AM-3:00 PM	MTWTF--	:30	9	\$240.00	P-30	0.00	NM	9	\$2,160.00
	MD -	<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
	Week:	06/11/24	06/17/24	MTWTF--		9				\$240.00		0.00			
N 4	WMALF	06/11/24	06/17/24	M-F PM Drive M-F	CM	3:00 PM-7:00 PM	MTWTF--	:30	9	\$280.00	P-30	0.00	NM	9	\$2,520.00
	PM -	<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
	Week:	06/11/24	06/17/24	MTWTF--		9				\$280.00		0.00			
													Totals	29	\$7,980.00

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

I, _____, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Authorized committee:

Agency requesting time (and contact information):

N/A

Candidate's political party:

Office sought (no acronyms or abbreviations):

Date of election:

General

Primary

Treasurer of candidate's authorized committee:

The undersigned represents that:

(1) the payment for the broadcast time requested has been furnished by (check one box below):

the candidate listed above who is a legally qualified candidate, or

the authorized committee of the legally qualified candidate listed above;

(2) this station is authorized to announce the time as paid for by such person or entity; and

(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion 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.

Candidate/Committee/Agency

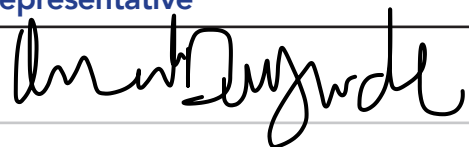
Station Representative

Signature:

AxMedia Buyer

Digitally signed by AxMedia Buyer
Date: 2024.05.17 10:20:54 -05'00'

Signature:



Name:

Name:

Date of Request to Purchase Ad Time:

Date of Station Agreement to Sell Time:


Federal Candidate Certification:

The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer to an opposing candidate or, if it does, (2) 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 or if 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.

Candidate/Authorized Committee/Agency

Signature:

AxMedia Buyer

 Digitally signed by AxMedia Buyer
Date: 2024.05.17 10:21:09 -05'00'

Name:

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No Date ad received: _____

Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).

Federal candidate certification signed (above): Yes No N/A

Disposition:

- Accepted
- Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*
- Rejected – provide reason: _____

*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):

Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

Upload order, this form and invoice (or traffic system print-out) or other documents 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 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.