CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.			
I, Christine Christopher DBA Christopher Communications, hereby request station time as follows:			
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE STATE OR LOCAL CANDIDATE			
ALL QUESTIONS/BLOCKS MUST BE COMPLETED			
Candidate name:			
Erin Skinner	erin Skinner		
Authorized committee:			
Citizens for Erin Skinner			
Agency requesting time (and contact information):			
N/A Christopher Communications chriscomm2@aol.com 5857550449			
Candidate's political party: Democratic			
Office sought (no acronyms or abbreviations): Supreme Court, 7th Judicial District of NY			
Pate of election: November 5, 2024 General Primary			
Treasurer of candidate's authorized committee: Candice Sengillo			
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 candid			
(2) this station is authorized to announce the time as paid for by			
(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: Christin Christop	Signature: Bryan Meyers. Name: Bryan Mayers		
Name: Christine Christopher	Name: Dryan Mayers		

Date of Request to Purchase Ad Time: May 16 2024

Date of Station Agreement to Sell Time: 5/22/2024

for a duration of at least four seconds at the candidate approved the broadcast a	ne broadcast matter to be aired pursuant to (2) contains a clearly identifiable photograph a simultaneously displayed printed state and that the candidate and/or the candidate ins a personal audio statement by the candidate has approved the broadcast.	oh or similar image of the candidate ement identifying the candidate, that
Candidate/Authorized Committee/	/Agency	
Signature:		
Name:		
Date:		
TC	O BE COMPLETED BY STATION O	NLY
Ad submitted to Station?	es 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)* — Spot not received 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 #: 447 2491	Station Call Letters: WRDC	Date Received/Requested:
Est. #:	Station Location: ROCHESTER NY	Run Start and End Dates:
purchased or attach separately. If station	affic system print-out) or other documents ime purchased, when spots actually aired, will not upload the actual times spots aired information immediately should be placed	reflecting this transaction to the OPIF or the rates charged and the classes of time