## ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

, GMMB	, hereby request station tim	ne as follows: See <b>Order</b>	for proposed
schedule and charges. See Invo	<b>sice</b> for actual schedule and c	harges.	
Check one:		The state of the s	
(1) a legally qualified candidat	e relating to any political matter of the for federal office; (2) an election the formal transfer in the federal office; (2) and election the federal office; (2) and election the federal office in t	o federal office; (3) a national	legislative
Ad does NOT communicate a only to a state or local issue).	message relating to any political n		(e.g., relates
ALL QUI	ESTIONS/BLOCKS MUST B	E COMPLETED	
Station time requested by:			
Agency name: GMMB	товин и потерия в настигности до на поста столо в посто на поста на поста на поста на поста на поста на поста На поста на поста н		
Address: 3050 K St, NW, #100, Washingto	n, DC 20008	i follows:	
Contact:	Phone number:	Email:	
Name of advertiser/sponsor (list entity committees) with no acronyms; name n			sion [for federal
Name: Ohioans United for Reproductive	e Rights		
Address: 545 E Town St, Columbus, OH 4	3215	k dr. Wila bi	
Contact:	Phone number:	Email:	
Station is authorized to announce the	time as paid for by such person o	r entity.	
List ALL chief executive officers, memb governing group(s) of the advertiser/sp Kellie Copeland - Treasurer Lauren Blauvelt- Co-Chair			other
By signing below, advertiser/sponsor rep executive committee and board of direc		the only executive officers, m	embers of the
If ad refers to a federal candidate(s) or	federal election, list ALL of the fo	ollowing:	/ N/A
Name(s) of every candidate referred to			
Office(s) sought by such candidate(s) (			
Date of election:		September State Control of Control of Control	
Clearly identify <b>EVERY</b> political matter ad (no acronyms); use separate page if		o in the	/ N/A

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## 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.

log deddines oddined in the stations disclosure statement.								
Advertiser/Sponsor		Station Representative						
Signature:		Signature: Sablecal Leubs						
Name: Lauren Blauvelt		Name: Rebecca S Jawa						
Date of Request to Purchase Ad Time:		Date of Station Agreement to Sell Time: 10/17/23						
TO BE COMPLETED BY STATION ONLY								
Ad submitted to station? Yes  Note: Must have separate PB-19 form	No	Date ad received: 10/10/23 of the ad (i.e., for every ad with differing copy).						
If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.								
Disposition:  Accepted  Accepted IN PART (e.g., ad not re  Rejected – provide reason:	eceived to determine	e content)*						
*Upload partially accepted form, then pro	omptly upload update	ed final form when complete.						
Date and nature of follow-ups, if any:								
Contract #:	Station Call Letters:							
Est. #:	Station Location:	Run Start and End Dates:						
For national issue ads only (not required for state/local issue ads):								
to the OPIF or use this space to docum	ent schedule of time	stem print-out) or other material reflecting this transaction e purchased, when spots actually aired, the rates charged						

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.

	Today	NS DIO 560 5 Country	y. <sup>(</sup>		rit of Cos		Ord to Broad			The Co		Broadca 114 No Coshocto	orth Sixtl on, Ohio	h Street	
Agency Order # Contract # Est 121815			Q1 Rep	Client ted Affide Chisans for Reproductive Reshts			Affidavi	ys	Signature/Date  10/16/23  End 10/23/23 Salesperson Pol.						
6-10	Account # Leo Les 5 00 sec WR_					73 Fran		ROS On-Off	ROS 6-7						
						Mon Tue Wed Thur Fri Sat		2 2 2 2 2	]						
AM Summ  ads @ \$1  ads @ \$ 8  ads @ \$ 8	0 = 7 = 8 =	Aye		ads @ \$ 7 _ads @ \$ 8 _Blitz TOTAL	3.33 = =	Sun Total	ads @ ads @		5 74 <u>8</u> 2- =		Bli Rer	notes notes(In)	=	2	

Nondiscrimination Policy. Coshocton Broadcasting Co. and stations WTNS (AM/FM) do not discriminate in advertising arrangements on the basis of race or ethnicity. Any provision in any advertising agreement entered into with an advertiser whose intent is to discriminate in such manner shall be null and void.

