CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.		
, C'huck Crabtre	, hereby request station time as follows:	
FEDERAL CANDIDATE		
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE		
4		
ALL QUESTIONS/BLOCK	KS MUST BE COMPLETED	
Candidate name: Chuck Crabtuu		
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:	Signature:	
x en	Worl Mars	
Name: Chuck Crabinee	Name: Traci Masim	
Date of Request to Purchase Ad Time: 4/15/24	Date of Station Agreement to Sell Time: 4/15/ax	

to an opposing candidate or, if it d for a duration of at least four secon the candidate approved the broad broadcast or if radio programming	hat the broadcast matter to be aired pursuan oes, (2) contains a clearly identifiable photog nds and a simultaneously displayed printed st cast and that the candidate and/or the candid, contains a personal audio statement by the ne candidate has approved the broadcast.	graph or similar image of the candidate tatement identifying the candidate, that idate's authorized committee paid for the	
Candidate/Authorized Commi	ttee/Agency		
Signature:			
Name:			
Date:			
	TO BE COMPLETED BY STATION		
Ad submitted to Station? Note: Must have separate PB-1	Yes No Date ad receiv 9 Forms for each version of the ad (i.e.,		
Federal candidate certification signed (above): Yes No N/A			
Rejected – provide reason: *Upload partially accepted form, the	d copy not yet received to determine sponsors: nen promptly upload updated final form when you will be updated final form you will be upda		
Contract #:	Station Call Letters:	Date Received/Requested:	
Est. #:	Station Location:	Run Start and End Dates:	
use this space to document schedu purchased or attach separately. If s	ule of time purchased, when spots actually aid tation will not upload the actual times spots a	ents reflecting this transaction to the OPIF or red, the rates charged and the classes of time	

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