ORDER

Orders Order / Rev: 719702 Alt Order #: Product Desc: 16074 WRKS-FM Estimate: 16074 Primary AE: Bo Bounds Flight Dates: 10/27/23 - 11/02/23 Original Date / Rev: 10/24/23 / 10/24/23 Sales Office: L-JAN Order Type: CONTROLLED Sales Region: Local **AMAG** Name: Agency Billing Type: Cash **Buying Contact:** Billing Contact: Billing Calendar: Broadcast EOM/EOC P.O. Box 24335 Billing Cycle: Agency Commission: 15% Jackson, MS 39225 Advertiser Name: Tate for Governor НН New Business End: Demographic: Product Codes: Candidates Advertiser External ID: Revenue Code 1: Agency Business Agency External ID: Revenue Code 2: Unit Code: General Spot Revenue Code 3: General Revenue Order Separation: 00:28:00

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
09/25/23	10/29/23	3	\$75.00	\$63.75
10/30/23	11/02/23	12	\$300.00	\$255.00

P-03

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
October 2023	3	\$75.00	\$63.75	0.00
November 2023	12	\$300.00	\$255.00	0.00
Totals	15	\$375.00	\$318.75	0.00

Account Executives

Priority:

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Bo Bounds			Start Of Order - End Of Order	100%

Ln Ch Start	End	Inventory Code	Break	Start/End T	ime Days	Len S	oots	Rate Pri	Rtg Type	Spots	Amount
N 1 WRKS 10/27/2	3 11/02/23	Out of Bounds	CM	7a-10a	MTWTF	1:00	15	\$25.00P-03	0.00 NM	15	\$375.00
		Out of Bounds							- 1		
Start Date	End Date	Weekdays	Spots/Week	<u>Rate</u>	Rating						
Week: 10/23/23	10/29/23	F	3	\$25.00	0.00				- 1		
Week: 10/30/23	11/05/23	MTWT	12	\$25.00	0.00						
								7	Totals	15	\$375.00

Buy Detail Report

Revision #: Date: 10/24/2023

Media: Client: Radio Tate for Governor Estimate:

16074

395 Hudson Street, 7th Floor

Vendor:

WRKS-FM

rimary Demo: Adults 35+ Market: Jackson, MS Product:

2023

Separation between spots: 30

Buyer: AMAG Media Assistant

Flight End Date: 11/7/2023 04:59 AM Flight Start Date: 10/27/2023 05:00 AM

New York, NY 10014

Phone: 212-242-9870

Fax: 212-242-0706

Format:

All Sports

\$C. CC	15		O lotal CPP/CPM:	\$375.00	Total Cost:	То
0.0		0	Total GRP/GIMP(000):			
	o 15	10	Total Spots:			Bo Bounds Show
\$0.00		ā				W
0 0	, , , , , , , , , , , , , , , , , , ,	i l	n 60	\$25 OO	10.002 AM	VRKS-FM
Rtg/CPP	Sports	WKS Dur 10/27 11/3	Dur	Gross	Code	Program
Adults 35+	Total			NTS 1	Daypart	Daypart

Buy Detail Report Summary by Station/System

Client: Tate for Governor

Media: Radio

roduct: 2023

larket: Jackson, MS

Estimate: 16074

rimary Demo: Adults 35+

Separation between spots: 30

 Flight Start Date:
 10/27/2023
 05:00 AM

 Flight End Date:
 11/7/2023
 04:59 AM

Buyer: AMAG Media Assistant

	Total	STN		Adults 35+	
Station	Spots	Gross	PCT	CPP	GRP PCT
WRKS-FM					
	15	\$375.0	\$375.00 100%	\$0.00	0.0 0%
Market Total:	15	\$375.00	0	\$0.00	0.0

Date: 10/24/2023

Buy Detail Report Summary by Station/Length

Media: Client: Radio Tate for Governor

roduct: 2023

Market: Jackson, MS

Separation between spots: rimary Demo: Adults 35+

> Estimate: 16074

Flight Start Date: 10/27/2023 05:00 AM

Flight End Date: 11/7/2023 04:59 AM

Buyer: AMAG Media Assistant

30

		Total	STN		Adults 35+	s 35+	
Station	Length	Spots	Gross	PCT	CPP	GRP PCT	
WRKS-FM	(A.C. 81)						
	60	15	\$375.00	\$375.00 100%	\$0.00	0.0 0%	
Market Total:	tal:	15	\$375.00	O	\$0.00	0.0	

Date: 10/24/2023

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See I nvoice for actual schedule and charges.
, American Media & Advocacy Group	, hereby request station time as follows:
IDENTIFY CANDIDATE TYPE	RAL CANDIDATE E OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED
Candidate name: Tate Reeves	
Authorized committee: Tate for Governor	
Agency requesting time (and contact information):	
N/A American Advocacy & Media Group	
Candidate's political party: Republican Party	
Office sought (no acronyms or abbreviations): Governor	
Date of election: November 7th, 2023	X General Primary
Treasurer of candidate's authorized committee: P.O. Box 24335, Jackson, MS 39225 - Treasurer: Kristin McDevitt	- Phone (601) 720-3294
The undersigned represents that: (1) the payment for the broadcast time requested has been fur the candidate listed above who is a legally qualified can the authorized committee of the legally qualified candi (2) this station is authorized to announce the time as paid for b (3) this station has disclosed its political advertising policies, incand other sales practices (not applicable to federal candidated THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCIN THE PLACEMENT OF ADVERTISING.	ndidate, or date listed above; y such person or entity; and cluding applicable classes and rates, discount, promotion tes).
Candidate/Committee/Agency	Station Representative
Signature: Stene Syshes	Signature: Bound) ask
Name: Steve Syckes	Name: Bounds
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: 10/10/28

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: Stene Syches
Name: Steve Syckes
Date:
TO BE COMPLETED BY STATION ONLY
Ad submitted to Station? 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 #: 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.