

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, VI MARKETING AND BRANDING, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

DAVID HOLT

Authorized committee:

Holt for OKC 2022

Agency requesting time (and contact information):

N/A

Candidate's political party:

REPUBLICAN

Office sought (no acronyms or abbreviations):

OKC MAYOR

Date of election:

2/7/2022

General

Primary

Treasurer of candidate's authorized committee:

Carly Farris

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.

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:

Renée Harriman

Signature:

Robert DeNiro

Name: Renée Harriman

Name:

Robert DeNiro

Date of Request to Purchase Ad Time: 1/19/2022

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:

Name:

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No

Date ad received:

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 (optional):

*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 #: <i>See Attached</i>	Station Call Letters: <i>See Attached</i>	Date Received/Requested: <i>4/31</i>
Est. #:	Station Location:	Run Start and End Dates: <i>1/31</i>

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.

Sales Order

Station: **KMGL-FM** Contract#: **61430818** Agency: **VI MARKETING AND BRANDING**
 Contract Name: **Holt Feb22 KMGL Est 4378** Address: **125 PARK AVENUE SUITE 200**
 Proposal#: **82596275-65E3-4D3D-869D-C85B2D5D1CBF** City: **OKLAHOMA CITY** State: **OK** Zip: **73102**
 Start Date: **1/31/22** End Date: **2/13/22** Phone: **(405) 525-0055**
 Revenue Type: **Local Political** Type: **Cash** Buyer:
 Advertiser: **CMA STRATEGIES** Tax Schedule: **(None)**
 Address: Agency Commission %: **15**
 City: State: Zip: Billing Cycle: **Standard**
 Product Name: **CMA Strategies** Salesperson: **1966MMGMT** Comm %: **0**
 Estimate #: **4378** Makegood Policy: **Within Contract Dates**
 Agency Client Code: **cma**
 Competitive Code: **POLITICAL**

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION							Per Wk	D/W	RATE	TOTALS		PTY
	START	END		START	END		M	T	W	T	F	SA	SU				SPOTS	\$\$	
1	1/31/22	2/06/22		6:00 AM	10:00 AM	30		2	2	2	4			10	D	40.00	10	400.00	0
2	2/07/22	2/13/22		6:00 AM	10:00 AM	30	4	4						8	D	40.00	8	320.00	0
3	1/31/22	2/06/22		10:00 AM	3:00 PM	30		4	5	5	5			19	D	40.00	19	760.00	0
4	2/07/22	2/13/22		10:00 AM	3:00 PM	30	5	5						10	D	40.00	10	400.00	0
5	1/31/22	2/06/22		3:00 PM	7:00 PM	30		2	2	2	4			10	D	40.00	10	400.00	0
6	2/07/22	2/13/22		3:00 PM	7:00 PM	30	4	4						8	D	40.00	8	320.00	0

Billing Projections: By Month

	Feb 22
CA	2,600.00
ST	2,600.00

Print Spot Prices

TOTAL SPOTS	65
GROSS TOTAL \$	2,600.00
ADJUSTED SPOTS	65
ADJUSTED TOTAL \$	2,600.00

APPROVE DECLINE

 General Manager
 1966kmun, 01/25/22 @2:13PM
 Administrative
 Interactive

Sales Order

Station: **KJKE-FM** Contract#: **61430817** Agency: **VI MARKETING AND BRANDING**
 Contract Name: **Holt Feb22 KJKE Est 4378** Address: **125 PARK AVENUE SUITE 200**
 Proposal#: **CA118051-2E9F-43E1-B5EE-74DB19D5077D** City: **OKLAHOMA CITY** State: **OK** Zip: **73102**
 Start Date: **1/31/22** End Date: **2/13/22** Phone: **(405) 525-0055**
 Revenue Type: **Local Political** Type: **Cash** Buyer:
 Advertiser: **CMA STRATEGIES** Tax Schedule: **(None)**
 Address: Agency Commission %: **15**
 City: State: Zip: Billing Cycle: **Standard**
 Product Name: **CMA Strategies** Salesperson: **1966MMGMT** Comm %: **0**
 Estimate #: **4378** Makegood Policy: **Within Contract Dates**
 Agency Client Code: **cma**
 Competitive Code: **POLITICAL**

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION							Per Wk	D/W	RATE	TOTALS		PTY
	START	END		START	END		M	T	W	T	F	SA	SU				SPOTS	\$\$	
1	1/31/22	2/06/22		6:00 AM	10:00 AM	30		2	2	2	4			10	D	35.00	10	350.00	0
2	2/07/22	2/13/22		6:00 AM	10:00 AM	30	4	4						8	D	35.00	8	280.00	0
3	1/31/22	2/06/22		10:00 AM	3:00 PM	30		3	3	4	4			14	D	35.00	14	490.00	0
4	2/07/22	2/13/22		10:00 AM	3:00 PM	30	5	5						10	D	35.00	10	350.00	0
5	1/31/22	2/06/22		3:00 PM	7:00 PM	30		2	2	2	4			10	D	35.00	10	350.00	0
6	2/07/22	2/13/22		3:00 PM	7:00 PM	30	4	4						8	D	35.00	8	280.00	0

Billing Projections: By Month

Feb 22
 CA 2,100.00
 ST 2,100.00

Print Spot Prices

TOTAL SPOTS 60
 GROSS TOTAL \$ 2,100.00
 ADJUSTED SPOTS 60
 ADJUSTED TOTAL \$ 2,100.00

APPROVE DECLINE
 General Manager
 1966kmun, 01/25/22 @2:13PM
 Administrative
 Interactive

Sales Order

Station: **KOMA-FM** Contract#: **61430819** Agency: **VI MARKETING AND BRANDING**
 Contract Name: **Holt Feb22 KOMA Est 4378** Address: **125 PARK AVENUE SUITE 200**
 Proposal#: **BF5F755D-4936-442C-8E4E-408665C235CC** City: **OKLAHOMA CITY** State: **OK** Zip: **73102**
 Start Date: **1/31/22** End Date: **2/13/22** Phone: **(405) 525-0055**
 Revenue Type: **Local Political** Type: **Cash** Buyer: _____
 Advertiser: **CMA STRATEGIES** Tax Schedule: **(None)**
 Address: _____ Agency Commission %: **15**
 City: _____ State: _____ Zip: _____ Billing Cycle: **Standard**
 Product Name: **CMA Strategies** Salesperson: **1966MMGMT** Comm %: **0**
 Estimate #: **4378** Makegood Policy: **Within Contract Dates**
 Agency Client Code: **cma**
 Competitive Code: **POLITICAL**

No	DATES		All wks	TIMES		LEN	DISTRIBUTION							Per Wk	D/W	RATE	TOTALS		PTY
	START	END		START	END		M	T	W	T	F	SA	SU				SPOTS	\$\$	
1	1/31/22	2/06/22		6:00 AM	10:00 AM	30		4	4	4	4			16	D	40.00	16	640.00	0
2	2/07/22	2/13/22		6:00 AM	10:00 AM	30	4	4						8	D	40.00	8	320.00	0
3	1/31/22	2/06/22		10:00 AM	3:00 PM	30		5	5	5	5			20	D	40.00	20	800.00	0
4	2/07/22	2/13/22		10:00 AM	3:00 PM	30	5	5						10	D	40.00	10	400.00	0
5	1/31/22	2/06/22		3:00 PM	7:00 PM	30		4	4	4	4			16	D	40.00	16	640.00	0
6	2/07/22	2/13/22		3:00 PM	7:00 PM	30	4	4						8	D	40.00	8	320.00	0
7	1/31/22	2/06/22		6:00 AM	10:00 AM	30						4		4	D	20.00	4	80.00	0
8	1/31/22	2/06/22		10:00 AM	3:00 PM	30						5		5	D	20.00	5	100.00	0

Billing Projections: By Month

Feb 22
 CA 3,300.00
 ST 3,300.00

Print Spot Prices

TOTAL SPOTS 87
 GROSS TOTAL \$ 3,300.00
 ADJUSTED SPOTS 87
 ADJUSTED TOTAL \$ 3,300.00

APPROVE DECLINE
 General Manager
 1966kmun, 01/25/22 @2:14PM
 Administrative
 Interactive

Sales Order

Station: **KRXO-FM** Contract#: **61430820** Agency: **VI MARKETING AND BRANDING**
 Contract Name: **Holt Feb22 KRXO Est 4378** Address: **125 PARK AVENUE SUITE 200**
 Proposal#: **6C9DCF8B-FAB2-4EE9-836B-012E96E0B395** City: **OKLAHOMA CITY** State: **OK** Zip: **73102**
 Start Date: **2/07/22** End Date: **2/13/22** Phone: **(405) 525-0055**
 Revenue Type: **Local Political** Type: **Cash** Buyer:
 Advertiser: **CMA STRATEGIES** Tax Schedule: **(None)**
 Address: Agency Commission %: **15**
 City: State: Zip: Billing Cycle: **Standard**
 Product Name: **CMA Strategies** Salesperson: **1966MMGMT** Comm %: **0**
 Estimate #: **4378** Makegood Policy: **Within Contract Dates**
 Agency Client Code: **cma**
 Competitive Code: **POLITICAL**

No	DATES		Alt	TIMES		LEN	DISTRIBUTION							RATE	TOTALS		PTY		
	START	END		wks	START		END	M	T	W	T	F	SA		SU	Per Wk		DAW	SPOTS
1	2/07/22	2/13/22		6:00 AM	10:00 AM	30	4	4						8	D	15.00	8	120.00	0
2	2/07/22	2/13/22		10:00 AM	3:00 PM	30	5	5						10	D	15.00	10	150.00	0
3	2/07/22	2/13/22		3:00 PM	7:00 PM	30	4	4						8	D	15.00	8	120.00	0

Billing Projections: By Month

Feb 22
 CA 390.00
 ST 390.00

Print Spot Prices

TOTAL SPOTS 26
 GROSS TOTAL \$ 390.00
 ADJUSTED SPOTS 26
 ADJUSTED TOTAL \$ 390.00

APPROVE DECLINE

- General Manager
- 1966kmun, 01/25/22 @2:15PM
- Administrative
- Interactive

From: payments@tylermedia.com on behalf of Intellipay <noreply@intellipay.com>
Sent: Friday, January 28, 2022 12:57 AM
To: Tyler Media
Subject: Tyler Media

Tyler Media

Payment Receipt

VI Marketing and Branding
125 Park Ave
Suite 200
OKLAHOMA CITY OK 73102
4055250055
jhoskins@thevibrand.com

Your payment was successfully processed.

Thank you. Your payment has been received.

Customer Account:	CMA/HOLT Political
Invoice:	C31314514
Payment Amount:	\$7,131.50
Convenience Fee:	\$142.63
Payment Total:	\$7,274.13
Payment Date:	01/27/2022
Card Number:	3..1029
Name on Card:	Janet Hoskins
Card Type:	American Express Card
Authorization Code:	238180
Reference Number	C31314514P46078420
Comments:	KJKE \$1785.00 KMGL \$2210.00 KOMA \$2805.00 KR XO \$331.50
Payment Origin:	Online Payment Terminal
Invoice#:	PrePay

Thank you,
Tyler Media
Support: 405-429-5027

* The service fee is non-refundable.