



Political Candidate Advertisements Agreement Form

Candidate Type: Federal Candidate State or Local Candidate

Date: October 26, 2018.

Station and Location: WDBN-FM

I, Dana A Goad,

[select one] Being

On behalf of: _____, a legally qualified candidate associated with the Democratic political party or organization, and seeking the office of Register of Wills in the General election to be held on November, 6, 2018, do hereby request advertising time as follows:

LENGTH OF BROADCAST	DAYPART, PKG. OR ROTATION	DAYS OF THE WEEK	CLASS OF TIME	TIMES PER WEEK	NUMBER OF WEEKS
see attached - option 1					

TOTAL CHARGES:

IMPORTANT NOTE: To avail himself or herself of the Lowest Unit Charge (LUC) available during a "Political Window" period (45 days prior to a Primary Election or 60 days prior to a General Election), a candidate for a federal office must sign the Certification on Page 3 of this Agreement Form.

This station does not discriminate in the sale of advertising time, and will accept no advertising, which is placed with the intent to discriminate on the basis of race or ethnicity. Advertiser hereby certifies that it is not buying broadcasting air time under this advertising sales contract for a discriminatory purpose, including but not limited to decisions not to place advertising on particular stations on the basis of race, national origin, or ancestry.

CONTINUITY (pink)
 SALES REP (green)
 TRAFFIC (yellow)
 ORIGINAL (white)

= Weekly Spread

NEW
 CHANGED
 SALES ORDER NUMBER: _____
 CLIENT ADDRESS: _____
 CITY/ST/ZIP: _____
 CONTACT: _____
 PHONE: _____
 FAX: _____
 Business Type: _____
 AGENCY ADDRESS: _____
 CITY/ST/ZIP: _____
 CONTACT: _____
 PHONE: _____
 FAX: _____
 ACCOUNT: DAVE GOAD
 AGENCY: _____
 ACCOUNT REP: JOE CAP
 AUTHORIZED BY: _____
 PO: _____
 DESCRIPTION: _____
 BILLING: _____
 MEDIA MONTH
 END OF MONTH
 GROSS
 END OF SCHEDULE
 NET
 FLAT BILL (Fill out PINK form w/ order)

Start Date: _____
 End Date: _____
 Weeks: _____
 Of: _____

LENGTH	Program R N W S	# of Spots	RATE	TOTAL	Start Date	Ending Date	# of Weeks	START TIME	ENDING TIME	MON	TUE	WED	THUR	FRI	SAT	SUN	
OPTION 1																	
30	WDYK	6	\$ 11.00	\$ 66.00	10/27/18	10/28/18	1	6A	7P								
30	WDYK	21	\$ 11.00	\$ 231.00	10/29/18	11/04/18	1	6A	7P	3	3	3	3	3	3	3	
30	WDYK	13	\$ 11.00	\$ 143.00	11/05/18	11/06/18	1	6A	7P	10	3						
30	WDZN	6	\$ 11.00	\$ 66.00	10/27/18	10/28/18	1	6A	7P								
30	WDZN	21	\$ 11.00	\$ 231.00	10/29/18	11/04/18	1	6A	7P	3	3	3	3	3	3	3	
30	WDZN	13	\$ 11.00	\$ 143.00	11/05/18	11/06/18	1	6A	7P	10	3						
OPTION 2																	
30	WDYK	26	\$ 11.00	\$ 286.00	10/30/18	11/04/18	1	6A	7P	4	4	4	4	6	4	4	
30	WDYK	14	\$ 11.00	\$ 154.00	11/05/18	11/06/18	1	6A	7P	10	4						
30	WDZN	26	\$ 11.00	\$ 286.00	10/30/18	11/04/18	1	6A	7P	4	4	4	4	6	4	4	
30	WDZN	14	\$ 11.00	\$ 154.00	11/05/18	11/06/18	1	6A	7P	10	4						
OPTION 3																	
30	WDYK	4	\$ 11.00	\$ 44.00	10/28/18	10/28/18	1	6A	7P								
30	WDYK	28	\$ 11.00	\$ 308.00	10/29/18	11/04/18	1	6A	7P	4	4	4	4	4	8	4	
30	WDYK	18	\$ 11.00	\$ 198.00	11/05/18	11/06/18	1	6A	7P	10	8						
30	WDZN	4	\$ 11.00	\$ 44.00	10/28/18	10/28/18	1	6A	7P								
30	WDZN	28	\$ 11.00	\$ 308.00	10/29/18	11/04/18	1	6A	7P	4	4	4	4	4	8	4	
30	WDZN	18	\$ 11.00	\$ 198.00	11/05/18	11/06/18	1	6A	7P	10	8						
TOTAL		260		\$ 2,860.00	Additional Info.												260

Approved

Entered

I represent that payment for the above described broadcast time has been paid by:

Committee for David Goad

You are authorized to announce the time as paid for by such person or entity. I represent that the person or entity is either a legally qualified candidate or an authorized committee or organization of the legally qualified candidate.

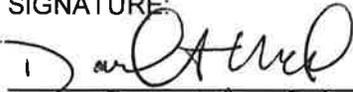
The name of the Treasurer of the candidate's authorized committee is:

Mary Goad

This station has disclosed to me its political advertising policies, including the following: applicable classes and rates; discount, promotional, and other sales practices (not applicable to federal candidates).

TO BE SIGNED BY CANDIDATE OR AUTHORIZED COMMITTEE:

SIGNATURE:



DATE OF SIGNATURE:

10/26/2018

Name: David Goad

Title: Candidate

TO BE SIGNED BY STATION REPRESENTATIVE:

Accepted Accepted in Part Rejected

SIGNATURE:



DATE OF SIGNATURE:

10/26/18

Name: Christina Kobinette

Title: Office Manager

This station does not discriminate in the sale of advertising time, and will accept no advertising, which is placed with the intent to discriminate on the basis of race or ethnicity. Advertiser hereby certifies that it is not buying broadcasting air time under this advertising sales contract for a discriminatory purpose, including but not limited to decisions not to place advertising on particular stations on the basis of race, national origin, or ancestry.

Actual Schedule of Broadcasts

(To Be Completed After Broadcasting Candidate Advertisement)

List each broadcast separately. Include all make-goods, if any, with explanation for each.

LENGTH OF BROADCAST	TIME OF DAY, ROTATION OR PACKAGE	DAYS OF THE WEEK	CLASS OF TIME	TIMES PER WEEK	NUMBER OF WEEKS
See attached					

DOCUMENTATION

Actual Schedule Run Summaries or Invoices can be attached to this Form showing the following:

1. Actual date, exact time, class and charge per spot;
2. Date and exact time for all make-goods (if any) and reasons for them; and
3. Exact date, time, class, and dollar amount for each rebate given (if any).

For any lower-priced spots of the same length and class that ran in the same periods as those ordered (or, if in error, a lower-priced spot of a different class ran that was not meant to run in the same period), list the dates and times, calculate the price differential, and describe the nature, amounts, and timing of all make-goods and rebates:

POLITICAL FILE REQUIREMENTS:

All of the foregoing information must be placed in the station's political file as soon as possible. If this information is generated less frequently than daily, the file should identify a contact person who can provide specific spot airing times.

CONTRACT



WDZN-FM
1251 Earl Core Road
Morgantown, WV 26505
(304) 296-0029

<u>Contract / Revision</u> 222721 /		<u>Alt Order #</u>
<u>Product</u> GENERAL 2018		
<u>Contract Dates</u> 10/27/18 - 11/06/18		<u>Estimate #</u>
<u>Advertiser</u> Committee For David Goad		<u>Original Date / Revision</u> 10/26/18 / 10/26/18
<u>Billing Cycle</u> EOM/EOC	<u>Billing Calendar</u> Calendar	<u>Cash/Trade</u> Cash
<u>Station</u> WDZN-FM	<u>Account Executive</u> Annette Wolford	<u>Sales Office</u> Cumberland
<u>Special Handling</u>		
<u>Demographic</u> Households		
<u>IDB#</u>	<u>Advertiser Code</u>	<u>Product Code</u>
<u>Agency Ref</u>		<u>Advertiser Ref</u>

And:

Committee For David Goad
519 Louisiana Ave
Cumberland, MD 21502

*Line	Ch	Start Date	End Date	Description	Start/End Time	Days	Length	Spots/Week	Rate	Type	Totals Spots Amount	
N 1	WDZN	10/27/18	11/06/18	M-Su 6a-7p	M-Su 6a-7p		:30			NM	40	\$440.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>				<u>Spots/Week</u>	<u>Rate</u>			
	Week:	10/22/18	10/28/18	-----33				6	\$11.00			
	Week:	10/29/18	11/04/18	3333333				21	\$11.00			
	Week:	11/05/18	11/11/18	+3-----				13	\$11.00			
Totals											40	\$440.00

Time Period	# of Spots	Gross Amount	Net Amount
10/01/18 - 10/31/18	15	\$165.00	\$165.00
11/01/18 - 11/06/18	25	\$275.00	\$275.00
Totals	40	\$440.00	\$440.00

Signature:  Date: 10/26/2018

(* Line Transactions: N = New, E = Edited, D = Deleted)

Notwithstanding to whom bills are rendered, advertiser, agency and service, jointly and severally, shall remain obligated to pay to station the amount of any bills rendered by station within the time specified and until payment in full is received by station. Payment by advertiser to agency or to service or payment by agency to service, shall not constitute payment to station. Station will not be bound by conditions, printed or otherwise contracts, insertion orders, copy instructions or any correspondence when such conflict with the above terms and conditions. Two week advance cancellation notice is required unless otherwise specified. The parties to this advertising agreement affirm that nothing in this agreement, or any of the actions, benefits and obligations relating to it, discriminate in any way on the basis of race or ethnicity.

Check amount is for net order
total on two stations

COMMITTEE FOR DAVID GOAD
519 LOUISIANA AVENUE
CUMBERLAND, MD 21502

120

85-7714/2521

10/26/2008 Date



Pay to the
Order of

Maryland Radio

\$ 880.00

Eight hundred eighty eight and 00/100 Dollars



MARY GOAD AUTHORIZED SIGNER

215 Pease Street
Cumberland, Maryland 21502
Ph: 301-722-5522



For Radio Ads

Mary S. Goad