CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges	. See Invoice for actual schedule and charges.							
I, Mark Varize	, hereby request station time as follows:							
IDENTIFY CANDIDATE TYPE	ERAL CANDIDATE IE OR LOCAL CANDIDATE							
ALL QUESTIONS/BLOC	KS MUST BE COMPLETED							
Candidate name: Mark Variez								
Authorized committee: The Committee To Elect Mark Varize	3							
Agency requesting time (and contact information): N/A								
Candidate's political party: N/A								
Office sought (no acronyms or abbreviations): Mayor, Hawa	ii County							
Date of election: August 10, 2024	General Primary							
Treasurer of candidate's authorized committee: Mark Varize								
The undersigned represents that: (1) the payment for the broadcast time requested has been fu	rnished by (check one box below):							
the candidate listed above who is a legally qualified ca								
the authorized committee of the legally qualified cand	idate listed above;							
(2) this station is authorized to announce the time as paid for k	by such person or entity; and							
(3) this station has disclosed its political advertising policies, in and other sales practices (not applicable to federal candidates)	·							
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	CRIMINATION ON THE BASIS OF RACE OR ETHNICITY							
Candidate/Committee/Agency	Station Representative							
Signature: <u>Mark L Varize</u> Mask L Varize (Mar 19, 2024 17:23 PDT)	Signature:							
Name: Mark Varize	Name: Christopher S. Leonard							
Date of Request to Purchase Ad Time: March 18, 2024	Date of Station Agreement to Sell Time: 3/19/24							

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: <u>Mark L Varize</u> Mark L Varize (Mar 19, 2024 17:23 PDT)									
Name: _{Mark} L Varize									
Date: March 19, 2024									
Ţ	O BE COMPLETED BY STATION OF								
Ad submitted to Station?	es No Date ad received:	3/11/24							
Note: Must have separate PB-19 Fo	rms for each version of the ad (i.e., for e	every ad with differing copy).							
Federal candidate certification signed (a	above): Yes No	N/A							
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 #: 5891 - 4/7 8/4	Station Call Letters: Kuxx Fr. KNUB FM KAOY FM KMWB FM	Date Received/Requested: 3/19/2-4							
Est. #:	Station Location: Hlo. Hi Kailus - Kowa - Hi	Run Start and End Dates: 3/19/24/ - 4/8/24/							
use this space to document schedule of purchased or attach separately. If station	traffic system print-out) or other documents f time purchased, when spots actually aired, n will not upload the actual times spots aired at information immediately should be placed	the rates charged and the classes of time d until an invoice is generated, the name							







BROADCAST CONTRACT

CLIENT

Mar 19, 2024

Broker

5891-17 8/9

NEW WEST BROADCASTING CORPORATION

ACCOUNT EXECUTIVE

ACCEPTED FOR NEW WEST BROADCASTING CORPORATION

British S. Como

1145 KILAUEA AVENUE	JEA AVENUE HILO, HAWAII 96720 (808) 935-5461 FAX (808) 93				35-77	761	HESKEIS	245E00E96	anese Maes	DA	TE:	March 18, 2024					
ADVERTISER	The Con	ımittee To Elec	t Mark Va	rize		Á	\GE	NCY									
CONTACT				PHONE 808-329-7570						FAX							
ADDRESS			•					CI	TY		Hilo						
STATE	HI ZIP CODE					96720 EMAIL ADI											
ACCOUNT EXECUTIVE	Billy Ker	 PROD	UCT		Ma	ayora	I Can	didate		CATEGORY							
START DATE											4/8/24						
TOTAL WEEKS	3 TOTAL COM																100
	KWXX_	_X KAOY	x_	B97	7X	В			K	PUA	\						
BILLING INSTRUCTIONS	k verstende framstellunger frem verstende Verstellungsrende andere vers	BROADCAS	ne allegations and the	X	CALEN	ASSESSED A	ALCO CONTRA	90 <u>00000000000000000000000000000000000</u>		19 <u>000000000000000000000000000000000000</u>		OOP	844 <u>98000000000000000</u>	April 19	Period and the second of the s	A STATE OF THE STA	And the second section of the second section of the second section of the second section sec
STATION	FLIGHT D	ATES	DAYPART		LENGTH	MON	TUE	WED	THU FRI SAT SUN SPOT COU		SPOT COUNT		RATE TOTAL				
KWXX (94.7 HILO)	3/19-4/8/24		6a	6a-10a		1	1	1	1	1			15	\$	15.00	\$	225.00
KWXX (94.7 HILO)	3/23-4/7/24		10:	a-3p	:30						1	1	6	\$	13.00	\$	78.00
KAOY (101,5 KONA)	3/19-4/8/24		6a	6a-10a		1	1	1	1	1			15	\$	15.00	\$	225.00
KAOY (101.5 KONA)	3/23-4/7/24		10	10a-3p							1	1	6	\$	13.00	\$	78.00
KNWB (97.1 HILO)	3/19-4/8/24		6a	6a-10a		1	1	1	1	1			15	\$	15.00	\$	225.00
KNWB (97.1 HILO)	3/23-4/7/24		10:	a-3p	:30						1	1	6	\$	13.00	\$	78.00
KMWB (93.1 KONA)	3/19-4/8/24		6a	-10a	:30	1	1	1	1	1			15	\$	15.00	\$	225.00
KMWB (93.1 KONA)	3/23-4/7/24		10	а-3р	:30		Section 1964				1	1	6	\$	13.00	\$	78.00
												TOTAL 84 \$1,212.00				00	
SPECIAL INSTRUCTIONS	, , , , , , , , , , , , , , , , , , , ,															\$0.00)
													TAX		\$	57.11	1
													TOTAL	Ĺ	\$1	,269.	11
	BILL KA (19. 2014 14.24 HST)			APPR	ROVAL					Mark L	ark . Varize (M.	- Vau	17/20 117/23 PDT)	00000			

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING