

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Barrett Hillier, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Barrett Hillier

Authorized committee:

Paid for by Barrett Hillier

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

Bonneville County Commissioner District #3

Date of election:

May 21, 2024

General

Primary

Treasurer of candidate's authorized committee:

Barrett Hillier

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:

Name: Barrett Hillier

Name:

Date of Request to Purchase Ad Time: 05/13/2024

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: _____

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 #:	Station Call Letters: KQEO KUM-KQPI	Date Received/Requested: 5.13.24
Est. #:	Station Location:	Run Start and End Dates: 5.14.24 - 5.21.24

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

Stations: KAOX-FM, KUPI-FM, KQEO-FM

Buyer:

Contract Name: Barrett Hillier Bonn Co Comm

Tax Schedule:

(None)

Contract#:

(none) Agency Commission %: 0

Start Date: 5/14/24

End Date:

5/21/24

Billing Cycle: Standard

Revenue Type: Local Direct

Type: Cash

Salesperson: 1414kwal

Comm %:

20

Advertiser: Barrett Hillier Bonneville Co

Makegood Policy: Within Contract Dates

Address: 10318 N 5th E

City: Idaho Falls

State: ID

Zip: 83401

Phone: (208) 705-5115

Product Name: May 2024 Primaries

Estimate #: May 2024

Competitive Code: Political

KAOX-FM

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION										RATE	TOTALS		PTY
	START	END		START	END		M	T	W	T	F	SA	SU	Per Wk	D/W	SPOTS		\$\$		
1	5/14/24	5/17/24		6:00 AM	10:00 AM	30		2	2	2	2				8	D	19.00	8	152.00	
2	5/14/24	5/17/24		10:00 AM	7:00 PM	30		3	3	3	3				12	D	14.00	12	168.00	Neal & Julie on NEWSTalk 107.9
3	5/20/24	5/20/24		6:00 AM	10:00 AM	30	3								3	D	19.00	3	57.00	
4	5/20/24	5/20/24		10:00 AM	7:00 PM	30	3								3	D	14.00	3	42.00	Neal & Julie on NEWSTalk 107.9
5	5/21/24	5/21/24		6:00 AM	12:00 PM	30		2							2	D	14.00	2	28.00	

TOTAL GROSS \$447.00, NET \$447.00

KUPI-FM

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION										RATE	TOTALS		PTY
	START	END		START	END		M	T	W	T	F	SA	SU	Per Wk	D/W	SPOTS		\$\$		
1	5/14/24	5/17/24		8:00 AM	6:00 PM	30		4	4	4	4				16	D	14.00	16	224.00	
2	5/20/24	5/20/24		8:00 AM	6:00 PM	30	4								4	D	14.00	4	56.00	
3	5/21/24	5/21/24		8:00 AM	12:00 PM	30		2							2	D	14.00	2	28.00	

TOTAL GROSS \$308.00, NET \$308.00

KQEO-FM

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION										RATE	TOTALS		PTY
	START	END		START	END		M	T	W	T	F	SA	SU	Per Wk	D/W	SPOTS		\$\$		
1	5/14/24	5/17/24		8:00 AM	6:00 PM	30		4	4	4	4				16	D	11.00	16	176.00	
2	5/20/24	5/20/24		8:00 AM	6:00 PM	30	4								4	D	11.00	4	44.00	
3	5/21/24	5/21/24		8:00 AM	12:00 PM	30		3							3	D	11.00	3	33.00	

TOTAL GROSS \$253.00, NET \$253.00

Billing Projections: By Month

	May 24
CA	1,008.00
ST	1,008.00

Print Spot Prices

TOTAL SPOTS	73
GROSS TOTAL \$	1,008.00
ADJUSTED SPOTS	73
ADJUSTED TOTAL \$	1,008.00

APPROVE DECLINE

- | | | |
|-----------------------|-----------------------|---------------------|
| <input type="radio"/> | <input type="radio"/> | Traffic |
| <input type="radio"/> | <input type="radio"/> | Sales Manager |
| <input type="radio"/> | <input type="radio"/> | Credit |
| <input type="radio"/> | <input type="radio"/> | Local Sales Manager |

KUPI FM

854 LINDSAY BLVD
IDAHO FALLS, ID 83402
2085221101

5/13/2024 1:51:27 PM

Reference Number: 587397476
Total: \$1,008.00
Transaction Type: Sale
Transaction Status: Pending Settlement
Card Brand: Visa
Card Number: xxxxxxxxxxxx8012
Entry Method: Keyed
Approval Code: 03831G
Approval Message: APPROVAL 03831G
AVS Result: 0
CSC Result: Match
Customer Reference ID:123456789123456
Customer Name: Barrett Hillier
Invoice: 587397476

X _____
Please sign here to agree to payment.