## ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

I, Health Forward Foundation	, hereby request station time as fo	ollows: See Order for proposed
schedule and charges. See Invo	oice for actual schedule and charges	<b>3.</b>
Check one:		
(1) a legally qualified candidate	e relating to any political matter of national e for federal office; (2) an election to federa ,, health care legislation, IRS tax code, etc.); o ussion at the national level.	al office; (3) a national legislative
Ad does NOT communicate a only to a state or local issue).	message relating to any political matter of	f national importance (e.g., relates
ALL QUE	ESTIONS/BLOCKS MUST BE COI	MPLETED
Station time requested by: GPS Impact		
Agency name: GPS Impact		
Address: 112 SE 4th Street Suite 202, Des	Moines, IA 50309	
Contact:	Phone number: 515-244-3468	Email: Info@gpsImpact.com
Name of advertiser/sponsor (list entity' committees] with no acronyms; name n	's full legal name as disclosed to the Fede nust match the sponsorship ID in ad):	eral Election Commission [for federal
Name: Health Forward Foundation	Annual growth designation for the property of	
Address: 2300 Main Street, Sulte 304 Kans	as City, MO 64108	
Contact:	Phone number: (816) 241-7006	Email: communications@healthforward.org
Station is authorized to announce the t	time as paid for by such person or entity.	
ist ALL of the chief executive officers or group(s) of the advertiser/sponsor (Use		or board of directors or other governing
Qiana Thomason, President/CEO Brenda Calvin, Chlef Operations Officer Christie Briscoe Zarkovich, Chlef Administra Lynette Wheeler, Chair Dred Scott, Vice Chair Kent Hawkins, Treasurer	ative, Financial, and Investment Officer	tri
	oresents that those listed above are the onl tors or other governing group(s).	y executive officers, members of the
f ad refers to a federal candidate(s) or	federal election, list ALL of the following	: N/A
Name(s) of every candidate referred to	<b>:</b>	<i>2</i> 7
Office(s) sought by such candidate(s) (r	no acronyms or abbreviations):	
Date of election:		
ad (no acronyms): use separate nage if	of national importance referred to in the necessary:  Newythers rulal hospital	
5.07		

## THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING. The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement. Advertiser/Sponsor Station Representative Signature: Signature: Name: Dawn Chlusano Name: Date of Request to Purchase Ad Time: 04-05-24 Date of Station Agreement to Sell Time: $\checkmark$ TO BE COMPLETED BY STATION ONLY Ad submitted to station? Date ad received: . No Yes Note: Must have separate PB-19 forms for each version of the ad (i.e., for every ad with differing copy). If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided. Disposition: Accepted Accepted IN PART (e.g., ad not received to determine content)\* Rejected - provide reason: \*Upload partially accepted form, then promptly upload updated final form when complete. Date and nature of follow-ups, if any: Contract #: Station Call Letters: Date Received/Reques 3526738 Station Location: Est. #: For national issue ads only (not required for state/local issue ads): Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.

# ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

, The REACH Healthcare Foundation	_, hereby request station time as fol	llows: See Order for proposed						
schedule and charges. See Invoi	ice for actual schedule and charges.							
Check one:								
Ad "communicates a message relating to any political matter of national importance" by referring to (1) a legally qualified candidate for federal office; (2) an election to federal office; (3) a national legislative issue of public importance (e.g., health care legislation, IRS tax code, etc.); or (4) a political issue that is the subject of controversy or discussion at the national level.  Ad does NOT communicate a message relating to any political matter of national importance (e.g., relates								
only to a state or local issue).								
ALL QUE	STIONS/BLOCKS MUST BE COM	IPLETED						
Station time requested by: GPS Impact								
Agency name: GPS Impact								
Address: 112 SE 4th Street Suite 202, Des I	Moines, IA 50309							
Contact:	Phone number: 515-244-3468	Email: Info@gpsImpact.com						
Name of advertiser/sponsor (list entity's committees] with no acronyms; name m	s full legal name as disclosed to the Feder oust match the sponsorship ID in ad):	ral Election Commission [for federal						
Name: The REACH Healthcare Foundation								
Address: 8131 Metcalf Avenue, Suite 200 O								
Contact:	Phone number: 913-432-4196	Email: brenda@reachhealth.org						
	ime as paid for by such person or entity.							
group(s) of the advertiser/sponsor (Use Brenda Sharpe, President & CEO Lynette Sparkman-Barnes, Chair Guy Collier, Vice Chair Jermee Jones, Secretary Justin Richter, Treasurer								
By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).								
If ad refers to a federal candidate(s) or t	federal election, list ALL of the following:	: √ N/A						
Name(s) of every candidate referred to	:							
Office(s) sought by such candidate(s) (no acronyms or abbreviations):								
Date of election:								
	of national importance referred to in the necessary:	The state of the s						

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DIN THE PLACEMENT OF ADVERTISING.	ISCRIMINATION ON THE BASIS OF RACE OR ETHI	VICITY
The advertiser/sponsor agrees to indemnify and hold harm attorney's fees, which may arise from the broadcast of the ad(s), the advertiser/sponsor also agrees to prepare a scrip log deadlines outlined in the station's disclosure statement	above-requested advertisement(s). For the above-requent, transcript or tape, which will be delivered to the state	uested
Advertiser/Sponsor	Station Representative	
Signature: Down	Signature: Wes Court	
Name: Dawn Chlusano	Name: Des Dotch	
Date of Request to Purchase Ad Time: 04-05-24	Date of Station Agreement to Sell Time:	2/24
TO BE COMPLET	ED BY STATION ONLY	
Ad submitted to station?	Date ad received: 4/5/24	
Note: Must have separate PB-19 forms for each versi		/).
If only one officer, executive committee member or dire in writing if there are any other officers, executive comm update this form if additional officers, members or direc	nittee members or directors, maintain records of inc	er/sponsor quiry and
Disposition:		
Accepted		
Accepted IN PART (e.g., ad not received to determ	ine content)*	
Rejected – provide reason:		
*Upload partially accepted form, then promptly upload up	dated final form when complete.	
Date and nature of follow-ups, if any:		
Contract # 3526738 Station Call Lett		
Est. #: 658 Station Location Wichia	Run Start and End Dates	9
For national issue ads only (not required for state/loc	al issue ads):	
Upload order, this disclosure form and invoice (or traffic to the OPIF or use this space to document schedule of and the classes of time purchased (including date, time attach separately. If station will not upload the actual tir contact person who can provide that information immedia the OPIF.	ime purchased, when spots actually aired, the rates class of time and reasons for any make-goods or re nes spots aired until an invoice is generated, the na	s charged ebates) or ime of a

# ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

J, United Methodist Health Ministry Fund	_, hereby request station time as fo	llows: See Order for proposed				
	ice for actual schedule and charges					
Check one:						
(1) a legally qualified candidate issue of public importance (e.g. subject of controversy or discu	relating to any political matter of national e for federal office; (2) an election to federa , health care legislation, IRS tax code, etc.); c ission at the national level. message relating to any political matter of	al office; (3) a national legislative or (4) a political issue that is the				
only to a state or local issue).	message rolding to any political matter of	Hational Importance (e.g.) relates				
ALL QUE	STIONS/BLOCKS MUST BE COM	MPLETED				
Station time requested by: GPS Impact						
Agency name: GPS Impact						
Address: 112 SE 4th Street Suite 202, Des	Moines, IA 50309					
Contact:	Phone number: 515-244-3468	Email: Info@gpsImpact.com				
Name of advertiser/sponsor (list entity's committees) with no acronyms; name n	s full legal name as disclosed to the Fede nust match the sponsorship ID in ad):	ral Election Commission (for federal				
Name: United Methodist Health Ministry Fu	nd					
Address: 100 East First Avenue, PO Box 13	384 Hutchinson, KS 67504					
Contact:	Phone number: 620-662-8586	Email: david@healthfund.org				
Station is authorized to announce the t	ime as paid for by such person or entity.					
group(s) of the advertiser/sponsor (Use David Jordan, President Lori Hartnett, Chair Matt Penner, Vice-Chair David Jordan, President Jennifer Clasen, Secretary Lynette Juresic, Treasurer By signing below, advertiser/sponsor rep	resents that those listed above are the only					
executive committee and board of directors or other governing group(s).  If ad refers to a federal candidate(s) or federal election, list ALL of the following:						
It ad refers to a federal candidate(s) or	federal election, list ALL of the following	; IN/A				
Name(s) of every candidate referred to	); 					
Office(s) sought by such candidate(s) (r	no acronyms or abbreviations):					
Date of election:						
Clearly identify EVERY political matter ad (no acronyms); use separate page if Expuding Medicura &	of national importance referred to in the incessary:  Thengthens nurse he	e V N/A				

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY								
The advertiser/sponsor agrees to indemnify and hold harmless attorney's fees, which may arise from the broadcast of the about ad(s), the advertiser/sponsor also agrees to prepare a script, trailing deadlines outlined in the station's disclosure statement.	ve-requested advertisement(s). For the above-requested								
Advertiser/Sponsor	Station Representative								
Signature: Oun On	Signature: Wes Gas								
Name: Dawn Chlusano	Name: Was Good								
Date of Request to Purchase Ad Time: 04-05-24	Date of Station Agreement to Sell Time: リカンイン化								
TO BE COMPLETED	D BY STATION ONLY								
Ad submitted to station? Yes No	Date ad received:								
Note: Must have separate PB-19 forms for each version	1								
in writing if there are any other officers, executive committ update this form if additional officers, members or director	If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.								
Disposition:									
Accepted  Accepted IN PART (e.g., ad not received to determine	e content)*								
Rejected – provide reason:									
· ·									
*Upload partially accepted form, then promptly upload updat	ed final form when complete.								
Date and nature of follow-ups, if any:									
Contract #: 3526738 Station Call Letters	Date Received/Requested:								
Est. #: Station Location:	Run Start and End Dates).  423 - 429								
For national issue ads only (not required for state/local									
to the OPIF or use this space to document schedule of time and the classes of time purchased (including date, time, classes, separately, if station will not upload the actual time	ystem print-out) or other material reflecting this transaction ne purchased, when spots actually aired, the rates charged lass of time and reasons for any make-goods or rebates) or as spots aired until an invoice is generated, the name of a sately should be placed in the "Terms and Disclosures" folder								

KWCH12s KBSD KBSH KBSL KWCH.COM

# WOC14628956 [00.00]

Order Printout

Order Status: Opened-New

Traffic Order #:

Buyer Order #: 13384746

AE: Unassigned (Wes Good)
Property: KWCH TV

Sales Region: Local

Comments:

Start/End Dates: 04/23/24 - 04/29/24

Agency: GPS Impact

Advertiser: RHF/HFF/UMHMF Estimate
Buyer: Dawn Chiusano Total Cos

Primary Demo: [N] Adults 50+ (RTG)

C/P/E: 75 / 77 / 658

Product Desc.: Issue

Estimate Desc.: Reach/Health Forward/United Methodist 4.23-4.30

Total Cost: \$6,300.00 (Cash)
Received Date: 4/22/24 9:00 AM

Paid for by - Reach Healthcare Foundation/Health Forward Foundation/United Methodist Ministrty FundSeparation: 30PopulationBuyType: CPP

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	12 NEWS AT	rogram: 12 NE	12 NEWS AT 1200PM	rogram: 12 NE	12 NEWS AT 1200PM	rogram: CBS N	CBS MORNINGS	rogram: CBS N	CBS MORNINGS	rogram: CBS N	CBS MORNINGS	rogram: CBS N	CBS MORNINGS	Program	ns
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	:30 6:00 PM-6:30 PM	(Program: 12 NEWS AT 1200PM)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 12:00p-12:30p TIME PERIOD ON KWCH+.	12:00 PM-12:30 PM	(Program: 12 NEWS AT 1200PM)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 12:00p-12:30p TIME PERIOD ON KWCH+.	12:00 PM-12:30 PM	(Program: CBS MORNINGS)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 7:00a-9:00a TIME PERIOD ON KWCH+.	:30 7:00 AM-9:00 AM T	(Program: CBS MORNINGS)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 7:00a-9:00a TIME PERIOD ON KWCH+	:30 7:00 AM-9:00 AMM	(Program: CBS MORNINGS)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 7:00a-9:00a TIME PERIOD ON KWCH+.	:30 7:00 AM-9:00 AMF	(Program: CBS MORNINGS)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 7:00a-9:00a TIME PERIOD ON KWCH+.	7:00 AM-9:00 AM -W	Time	
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	B	LUS - ACT	B	LUS - ACT	23	- ACTUAL	P 23	- ACTUAL	B	- ACTUAL	PS	- ACTUAL	53		
		JAL Dec/2023L		JAL Dec/2023L		Dec/2023LS Mc		Dec/2023LS Mc		Dec/2023LS Mo		Dec/2023LS Mo			
		S Mo-Fr 12:00		S Mo-Fr 12:00		o-Fr 7:00a-9:00	_	o-Fr 7:00a-9:00		)-Fr 7:00a-9:00		-Fr 7:00a-9:00			
		p-12:30p TIME		p-12:30p TIME		a TIME PERIC		a TIME PERIC		a TIME PERIC		a TIME PERIC			, s
		PERIOD ON H		PERIOD ON K		D ON KWCH+		D ON KWCH+		D ON KWCH+		D ON KWCH+			Spots
		WCH+.		WCH+	/	-						-			
					_		_		1		1	-	1	Total Spots	+
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	7.40		4.70		4.70		2.10		2.10		2.10		2.10	RTG	2
	7.40		4.70		4.70		2.10		2.10		2.10		2.10	GRP	[N] Adults 50+
	0		95.74		95.74		1	1	1 285./		1 1	1	1 285./	CPP	

Generated Date: 4/22/24 11:15 AM

List	List Items								Spots	Totals	Z	[N] Adults 50+	100
Line	Program	ST	Len	Time	Days TWTFSS M	Rate	Apr 23			Total Total Cost	RTG	GRP	СРР
ω	12 NEWS AT 600PM	Z	:30	NM :30 6:00 PM-6:30 PM -W	-W-	1,500.0 0	1	P3		1 1,500.00	7.40	7.40	7.40 202.7
_	(Program: 12 NE	A SW	T 600	)PM)Dec/2023LS -	WICHITA-	нитсни	<b>USON PLU</b>	JS - ACTU	(Program: 12 NEWS AT 600PM)Dec/2023LS - WICHITA-HUTCHINSON PLUS - ACTUAL Dec/2023LS Mo-Fr 6:00p-6:30p TIME PERIOD ON KWCH+.			33	
					Spot	Spot Totals:	∞			8 6300.00		32.00	_
				<u>Z</u>	[N] Adults 50+ GRP:	+ GRP:	32.60						
					Rate	Rate Totals:	6300.00						
M	MONTH			SPOTS	0	COST		GRP	GRP MONTH SPOTS COST GRP				
April	<u> </u>			<b>∞</b>	\$6,300.00	00.00		32.60					

00:30:00

**KWCH12**®

Orders	Order / Rev:	3526738		KBSD KBSH KBSL
	Alt Order #:	WOC14628956		
	Product Desc:	Issue		кwсн.сом
	Estimate:	658		KWCH
	Flight Dates:	04/23/24 - 04/29/24	Primary AE:	Wesley Good
	Original Date / Rev:	04/22/24 / 04/22/24	Sales Office:	GN-PA
	Order Type:	NORMAL	Sales Region:	National
Agency	Name:	GPS Impact		
	Buying Contact:		Billing Type:	Cash
	Billing Contact:		Billing Calendar:	Broadcast
		112 SE 4th St Unit 202	Billing Cycle:	EOM/EOC
		Des Moines, IA 50309-4858	Agency Commission:	15%
Advertiser	Name:	RHF/HFF/UMHMF		
	Demographic:	A50+	New Business End:	
	Product Codes:	Issue - National - Other	Advertiser External ID:	630864
	Revenue Code 1:	AGY	Agency External ID:	133411
	Revenue Code 2:	POL	Unit Code:	General

Bill Plan			Totals
	 1	1	

POL-ISS

P-03

Revenue Code 3:

Priority:

Dill I lall					10000				
Start Date	End Date	# Spots	Gross Amount	Net Amount	Month	# Spots	Gross Amount	Net Amount	Rating
04/01/24	04/28/24	7	\$5,700.00	\$4,845.00	April 2024	7	\$5,700.00	\$4,845.00	30.50
04/29/24	04/29/24	1	\$600.00	\$510.00	May 2024	1	\$600.00	\$510.00	2.10
					Totals	8	\$6,300.00	\$5,355.00	32.60

Order Separation:

## **Account Executives**

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Wesley Good	GN-PA	National	Start Of Order - End Of Order	100%

## MultiChannel

Mattionalino											
Ln Ch Start	End	Inventory Code	Break	Start/End	Time Days	Len Sp	ots	Rate Pri	Rtg Type	Spots	Amount
N 1 All 04/23/	24 04/29/24	CBS Mornings	CM	7:00 AM-9:0	00 AM 111-1	:30	4	\$600.00P-03	2.10 NM	4	\$2,400.00
		CBS This Morning		(7:00 AM-9:	00 AM)						
(Program: CBS	MORNINGS	)							- 1		
Dec/2023LS - V	VICHITA-HU	TCHINSON PLUS - A	ACTUAL De	c/2023LS Mc	o-Fr 7:00a-9:00a T	IME PERIO	DD OI	N KWCH+.			
Start Date	End Date	Weekdays	Spots/Week	Rate	Rating						
Week: 04/23/24	04/29/24	111-1	4	\$600.00	2.10						
N 2 All 04/23/	24 04/25/24	12 News @ 12p	CM	12:00 PM-1	2:30 PI-1-1	:30	2	\$450.00P-03	4.70 NM	2	\$900.00
		12 News @ 12p		(12:00 PM-1	2:30 PM)				- 1		
(Program: 12 N	EWS AT 120	00PM)		~							
Dec/2023LS - V	VICHITA-HU	TCHINSON PLUS - A	ACTUAL De	c/2023LS Mc	o-Fr 12:00p-12:30p	TIME PE	RIOD	ON KWCH+.	- 1		
Start Date	End Date	Weekdays	Spots/Week	Rate	Rating						
Week: 04/22/24	04/28/24	-1-1	2	\$450.00	4.70						
N 3 All 04/23/	24 04/26/24	12 News @ 6p M-F	CM	6:00 PM-6:3	30 PM1-1	:30	2 :	\$1,500.00P-03	7.40 NM	2	\$3,000.00
		12 News @ 6p M-I	=	(6:00 PM-6:	30 PM)				- 1		
(Program: 12 N									- 1		
Dec/2023LS - V	VICHITA-HU	TCHINSON PLUS - A	ACTUAL De	c/2023LS Mc	o-Fr 6:00p-6:30p T	IME PERIO	OD OI	N KWCH+.	1		
Start Date	End Date	Weekdays	Spots/Week	Rate	Rating				- 1		
Week: 04/22/24	04/28/24	1-1	2	\$1,500.00	7.40						
	adalah 20 km di Sebit								Totals	8	\$6,300.00
											35 5350