

**POLITICAL RECORD OF REQUEST**

COMPLETED FORM MUST BE SENT AT TIME OF REQUEST AND WILL BE PLACED IN POLITICAL/ PUBLIC INSPECTION FILE.)

**1. Requestor Information:**

**Requestor Name:** Leighton LLC  
**Contact Name:** Kyle Leighton  
**Phone Number:** 610-220-7188

**Address:**  
101 N Loop Blvd E, Austin TX 78751

**2. Date of request:** 2/15/24

**3. Request received by:** Leatrice Henderson – Mark Ongsya  
**ISSUE**

Please check one:

- Ad (whether national or state/local) “communicates a political matter of national importance” by referring to (1) a legally qualified candidate for any federal office; (2) any election to federal office; or (3) any political matter of national importance, whether legislative or otherwise (e.g., immigration, IRS tax code, federal cabinet or judicial appointments, etc.).

OR

- Ad relates to state or local issue and does not communicate a political matter of national importance (i.e., does not refer to a federal candidate/election, or any political matter of national importance such as immigration, IRS tax code, federal cabinet or judicial appointments, etc.).

**4. Paid for by (Advertiser/sponsor name, address, phone number & contact):**

- a. **Name:** PBM Accountability Project
- b. **Contact Name:** Mark Blum
- c. **Phone Number:** Click or tap here to enter text.
- d. **Address:** 1025 Connecticut Avenue, Suite 907, Washington DC 20036

**5. If ad refers to any federal election or federal candidate list: ALL name(s) of candidate(s) referred to, office being sought and date of election:** Click or tap here to enter text.

**6. If ad refers to any state election or state candidate: ALL name(s) of candidate(s) referred to, office being sought and date of election:**

**7. If ad refers to any national issues, identify ALL issues addressed (legislative or otherwise):**  
**Addressing market dysfunctions in health care**

**8. List ALL sponsor’s chief executive officers OR members of executive committee OR board of directors:**

**Mark Blum. Managing Director**

**9. If only one name is listed in question 8 or on documentation provided by requestor/agency/advertiser, please certify that you have made a follow-up inquiry by initialing here: \_\_\_\_\_ (initial here)**

**10. Describe of the Content of the Ad (including any state or local issue mentioned in the content of the ad):** Congress Pass the Drug Law

**11.  DMA: Burlington, VT,  Interconnect (Check if Yes)**

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**Zones:**

**12. Distribution Platform(s): Check if applies:**

Linear TV;     VOD;     Digital/websites/apps

**13. Date and information provided, if any:**

**13. Disposition:**

Accepted – see attached contract details

Rejected – provide reason: Click or tap here to enter text.

**14. Additional Information:** Click or tap here to enter text.

**Date ROR completed on: 2/15/24**