New copy 5-14-24

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.			
1, Shelley Stabe hereby request station time as follows:			
, mereby request station time as tomother			
FEDERAL CANDIDATE			
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE			
STATE OR LOCAL CANDIDATE			
ALL QUESTIONS/BLOCKS MUST BE COMPLETED			
Candidate name: KEVIN VIRGIL			
Authorized committee:			
VIRGIL For ConGRESS			
Agency requesting time (and contact information):			
N/A			
Candidate's political party:			
REPUBLICAN			
Office sought (no acronyms or abbreviations):			
U.S. HOUSE OX REPRESENTATIVES			
Date of election:			
June 4, 2024			
Treasurer of candidate's authorized committee:			
Liz Curtis			
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 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 Population			
Station Representative Let Lies ky be K			
flet Weskreak			

to an opposing candidate or, if it do for a duration of at least four second the candidate approved the broadca	at the broadcast matter to be aired pes, (2) contains a clearly identifiable as and a simultaneously displayed prest and that the candidate and/or the contains a personal audio statement	oursuant to this disclosure either (1) does not refer ohotograph or similar image of the candidate inted statement identifying the candidate, that e candidate's authorized committee paid for the by the candidate that identifies the candidate, cast.
Candidate/Authorized Commit	tee/Agency	
Signature:	-	
Name: Chilley 54	ah	
Date: 5/9/24		
	TO BE COMPLETED BY ST	ATION ONLY
Ad submitted to Station?	Yes No Date a	d received: 5-14-24
		d (i.e., for every ad with differing copy).
Federal candidate certification signe	ed (above): Yes	No N/A
Disposition: Accepted Accepted IN PART (e.g., ad Rejected – provide reason:	copy not yet received to determine	sponsor ID)*
*Upload partially accepted form, th	en promptly upload updated final fo	orm when complete.
Date and nature of follow-ups, if an	y (e.g., insufficient sponsor ID tag):	
Contract #:	Station Call Letters:	Date Received/Requested: 5-15-27
Est. #:	Station Location: Signx Center, D	Run Start and End Dates: 5-13-24-5-31-24

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 purchased or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name