

Sales Order

Station: **KFKF-FM** Agency: **SADLER STRATEGIC MEDIA**
 Contract Name: **KFKF EST 2456-01** Address: **12103 Viewcrest Road**
 Contract#: **121893** City: **Los Angeles** State: **CA** Zip: **91604**
 Start Date: **10/22/20** End Date: **10/28/20** Buyer:
 Revenue Type: **NATIONAL POLITICAL** Type: **Cash** Tax Schedule: **(None)**
 Advertiser: **DEMOCRATIC ASSOC OF SECR OF ST** Agency Commission %: **15**
 Address: Billing Cycle: **Standard**
 City: State: Zip: Salesperson: **574KLOS** Comm %: **12**
 Product Name: **Secretaries of State** Makegood Policy: **Within Contract Dates**
 Estimate #: **2456**
 Competitive Code: **POLITICAL & GOVERNMENT**

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	10/22/20	10/23/20		6:00 AM	10:00 AM	60				X	X			4	W	50.00	4	200.00	2
2	10/22/20	10/23/20		10:00 AM	3:00 PM	60				X	X			4	W	50.00	4	200.00	2
3	10/22/20	10/23/20		3:00 PM	7:00 PM	60				X	X			4	W	50.00	4	200.00	2
4	10/24/20	10/24/20		10:00 AM	3:00 PM	60						X		3	W	35.00	3	105.00	2
5	10/26/20	10/28/20		6:00 AM	10:00 AM	60	X	X	X					6	W	50.00	6	300.00	2
6	10/26/20	10/28/20		10:00 AM	3:00 PM	60	X	X	X					6	W	50.00	6	300.00	2
7	10/26/20	10/28/20		3:00 PM	7:00 PM	60	X	X	X					6	W	50.00	6	300.00	2

Billing Projections: By Month

	Oct 20	Nov 20
CA	1,605.00	0.00
ST	705.00	900.00

☒ Print Spot Prices

TOTAL SPOTS **33**
 GROSS TOTAL \$ **1,605.00**
 ADJUSTED SPOTS **33**
 ADJUSTED TOTAL \$ **1,605.00**

APPROVE DECLINE

☐ ☐ General Manager
☐ ☐ Sales Manager
☐ ☐ National Sales Manager
☐ ☐ Local Sales Manager

ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

I, Sheri Sadler, hereby request station time as follows: See **Order** for proposed schedule and charges. See **Invoice** 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 QUESTIONS/BLOCKS MUST BE COMPLETED

Station time requested by:

Agency name: **Sadler Strategic Media**

Address: **12103 Viewcrest Road**

Contact: **Sheri Sadler**

Phone number: **818-506-5443**

Email: **sheri@sadlerstrategic.com**

Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission [for federal committees] with no acronyms; name must match the sponsorship ID in ad):

Name: **SEE LETTER OF AUTHORIZATION**

Address:

Contact:

Phone number:

Email:

Station is authorized to announce the time as paid for by such person or entity.

List ALL chief executive officers, members of the executive committee and the board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary.):

SEE LETTER OF AUTHORIZATION

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 federal election, list ALL of the following:

☐ N/A

Name(s) of every candidate referred to: **SEE LETTER OF AUTHORIZATION**

Office(s) sought by such candidate(s) (no acronyms or abbreviations): **SEE LETTER OF AUTHORIZATION**

Date of election:

Clearly identify **EVERY** political matter of national importance referred to in the ad (no acronyms); use separate page if necessary:

☐ N/A

SEE LETTER OF AUTHORIZATION

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:

Sheri Sadler

Signature:

Name: Sheri Sadler

Name:

Date of Request to Purchase Ad Time:

Date of Station Agreement to Sell Time:

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).

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/Requested:

Est. #:

Station Location:

Run Start and End Dates:

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.



LETTER OF AUTHORIZATION

Democratic Association of Secretaries of State
777 S. Figueroa St., Suite 4050
Los Angeles, CA 90017

October 6, 2020

Sheri Sadler
Sadler Strategic Media, Inc.
12103 Viewcrest Road
Studio City, CA 91604

Dear Ms. Sadler:

Please accept this letter as authorization to represent the Democratic Association of Secretaries of State. Our official information is as follows:

Name *Democratic Association of Secretaries of State*
Address *777 S. Figueroa St., Suite 4050, Los Angeles, CA 90017*
Phone *(213) 452-6565*
Fax *(213) 452- 6575*
Name of Chairman *Alex Padilla*
Name of Treasurer *Nellie Gorbea*
FEDERAL TAX I.D.# *263853861*

Thank you,

Christopher Guerrero, Director
Democratic Association of Secretaries of State

Democratic Association of Secretaries of State
777 S. Figueroa St., Suite 4050, Los Angeles, CA 90017
www.demsofstate.org

Sadler Strategic Media Traffic Instructions

Date: 10/20/2020

Est. 2456

Client: Democratic Association of Secretaries of State

Flight: 10/22/20-UFN

Media: Radio

Length: :60

ISCI/Title: DASS 60R 7710H YinkaFaleti-CallOfDuty

Rotation: 100%

Delivery: Email

Stations:	KCFX-FM	KFTK-FM	KZPT-FM
	KCMO-FM	KMJM-FM	WARH-FM
	KFKF-FM	KMOX-AM	WIL-FM
	KMBZ-FM	KSHE-FM	

Agency Contact Info:

Julie Jones

julie@sadlerstrategic.com

818-439-7413



STEEL CITY MEDIA

CREDIT CARD AUTHORIZATION *please print legibly*

Card Type: MasterCard Today's Date: 10-21-2020

Card Number: 5532321370972750

Expiration date: 10/2023 CVVS code: 492

Company Name: Sadler Strategic

Name as it appears on card: Sadler Strategic

Billing address for credit card:

Address: 12103 Viewcrest Road

City: Studio City State: CA Zip: 91604

Invoice(s) Being Paid: DASS 10/22-11/1

KFKF-FM

Amount Charged: \$1,364.25

The undersigned authorizes Steel City Media and its related companies (KBEQ-FM, KFKF-FM, KMXV-FM, KCKC-FM) to charge account balances to the above credit card as they may occur from time to time. We further authorize you to communicate with us via email.

Keep card on file for future use ☐

One time only charge ☒

Cardholders Name (please print): PayClearly

Cardholders Signature: [Signature]