

KFLN

P.O. Box 790
Baker, Montana 59313

SALESPERSON <u>Jamie</u>	DATE <u>5/4/20</u>
ACCOUNT NAME <u>Brian O'Connor</u>	
ADDRESS <u>PO Box 361</u>	
CITY <u>Baker, MT</u>	
START DATE <u>5/5/20 - 5/8/20</u>	<u>5/11/20 - 5/15/20</u>
END DATE <u>5/25/20 - 5/29/20</u>	

\$ _____ PER PROGRAM
 \$ 7.00 PER ANNOUNCEMENT
 TOTAL NUMBER OF ANNOUNCEMENTS 42
 TOTAL BILLING \$294.00
 AFFIDAVIT REQUIRED: YES _____ NO X
 BILLING MONTH May 2020

LENGTH OF PROGRAM _____
 LENGTH OF ANNOUNCEMENT 30
 TIME: DRIVE _____ DAY _____ NIGHT _____ OTHER _____
 PRODUCT Brian O'Connor For Commissioner
 CO-OP COPY REQUIRED: YES _____ NO X

1	2	3	4	5 8am - 1 12pm - 1 5pm - 1	6 8am - 1 12pm - 1 5pm - 1	7 8am - 1 12pm - 1 5pm - 1
8 8am - 1 12pm - 1 5pm - 1	9	10	11 8am - 1 12pm - 1 5pm - 1	12 8am - 1 12pm - 1 5pm - 1	13 8am - 1 12pm - 1 5pm - 1	14 8am - 1 12pm - 1 5pm - 1
15 8am - 1 12pm - 1 5pm - 1	16	17	18	19	20	21
22	23	24	25 8am - 1 12pm - 1 5pm - 1	26 8am - 1 12pm - 1 5pm - 1	27 8am - 1 12pm - 1 5pm - 1	28 8am - 1 12pm - 1 5pm - 1
29 8am - 1 12pm - 1 5pm - 1	30	31				

Brian O'Connor

AUTHORIZED SIGNATURE


ADDITIONAL INSTRUCTIONS:
3129

KJJM-FM

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\$ _____ PER PROGRAM	LENGTH OF PROGRAM _____
\$ <u>7.00</u> PER ANNOUNCEMENT	LENGTH OF ANNOUNCEMENT <u>30</u>
TOTAL NUMBER OF ANNOUNCEMENTS <u>42</u>	TIME: DRIVE _____ DAY _____ NIGHT _____ OTHER _____
TOTAL BILLING <u>\$294.00</u>	PRODUCT <u>Brian O'Connor For Commissioner</u>
AFFADAVIT REQUIRED: YES _____ NO <u>X</u>	CO-OP COPY REQUIRED: YES _____ NO <u>X</u>
BILLING MONTH <u>May 2020</u>	

1	2	3	4	5 8am-1 12pm-1 5pm-1	6 8am-1 12pm-1 5pm-1	7 8am-1 12pm-1 5pm-1
8 8am-1 12pm-1 5pm-1	9	10	11 8am-1 12pm-1 5pm-1	12 8am-1 12pm-1 5pm-1	13 8am-1 12pm-1 5pm-1	14 8am-1 12pm-1 5pm-1
15 8am-1 12pm-1 5pm-1	16	17	18	19	20	21
22	23	24	25 8am-1 12pm-1 5pm-1	26 8am-1 12pm-1 5pm-1	27 8am-1 12pm-1 5pm-1	28 8am-1 12pm-1 5pm
29 8am-1 12pm-1 5pm-1	30	31	 AUTHORIZED SIGNATURE			

ADDITIONAL INSTRUCTIONS: <u>3129 FM</u>
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CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

Brian G O'Connor hereby request station time as follows:

IDENTIFY CANDIDATE TYPE

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Brian G O'Connor

Authorized committee:

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

Fallon County Commissioner

Date of election:

6-2-20

General

Primary

Treasurer of candidate's authorized committee:

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.

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: <i>Brian G O'Connor</i>	Signature:
Name: <i>Brian G O'Connor</i>	Name:
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: