☑New Client ☑ □ Revision of Ore						Order Numbe	er <u>3180-0</u>)05	Sher	idan Me	dia	E	3roa	adc	ast	Or	der
Customer Numb	er						Customer Agency	У				-		-			
Advertiser		YRUS W							r KROE (•	ΚZW		-		KW		(3)
Address	185	WILDF	LOWE	ER (KCLL	<u> </u>					KLQ				OLD		(6)
City BIG H										7) 🗆	FOX				SMA		(9)
Contact CYR							Fax		□ MAGIC (10) 🗆	INTE					-DIGI	
□ Local 7/	COLIT	7CAL Salesper	rson	E-m	ail <u>C</u> Y	rus avote	westem.co	m_	Billing Type: Weekly	□ Monthly □ Other		er End	d-of-So	hedule	Œ	05.)
□ Trade □ Other □ Co-op Billing?	6	Priority Affidavit	:type ଢ∕√o		, co-op c		NOMINE H	louse Dist.	Nakowie Die	andard Broadca 3 □ No	st	⊿ Cal	endar I	Month			
BILL SPON SPOT		CART CART	TC PC PC	PRI	LEN LEN	START DATE START DATE START DATE	END DATE END DATE END DATE	PROGRAM# START TIME	POSITION# END TIME	RATE RATE RATE	М	T	w	τ	F	S	S
/	1	340	98	1	:30	8/14/20	8/18/20	06:00	10:00	12.00	2	2.			2	2	2
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BT= Billing Ty				criptio	n List								10		H	120	,00
PC= Product PRI= Priority			ist)						5	Spots & Progra	ams		8		#	74	.00
													18		H.	194.	,00



Sheridan Media P.O. Box 5086 Sheridan, WY 82801 307-672-7421

CYRUS WESTERN 185 WILDFLOWER CIRCLE SHERIDAN, WY 82801

KROE-AM Order Confirmation

OrderID:

3180-005

Sponsor:

Cyrus Western Cyrus Western

Product: Estimate/PO:

House District 51

AccountRep: BillingCycle:

House/political End-of-Schedule

InvoiceŤype:

Times/Rates Notarized Affidavit

Run Dates:

8/14/2020 - 8/18/2020

Items Ordered:

18

Ordered Amount: \$194.00

Scheduled Station(s): KROE-AM
Cyrus Western

Run Dates		Run Weeks	Run Times		Мо	Tue	We	Thu	Fri	Sat	Sun	Week Total	Length	Description	Avail Type	Copy ID	Qty	item Cost	Total Cost
01 8/14/2020 · 02 8/14/2020 ·		All Weeks All Weeks	06:00 AM - 10 10:00 AM - 02		2 2	2			2 2	2 2	2 2	10 8		Spot Spot		340 340	10 8	12.00 9.25	120.00 74.00
End-of-Sc	hedule Proj	ected Billing:		·															
	Jul-20	0.00)	Aug-20)			194.0	00		S	ep-20		(0.00	(Q3-2020		194.00
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CANDIDATE ADVERTISEMENT AGREEMENT FORM

Date of Request to Purchase Ad Time: 8 7 20	Name: CYRUS WESTERN	Signature:	Candidate/Committee/Agency	THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.	(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.	(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;	The undersigned represents that:	Treasurer of candidate's authorized committee: ANNE PENDERGAST	Date of election: AUGUST 18, 2020	Office sought (no acronyms or abbreviations): WYOMING STATE REPRESEN	Candidate's political party: REPUBLICAN	Agency requesting time (and contact information):	SAMMA SOMEONE PROPERTY AND ADMINISTRATION OF THE PROPERTY ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PROPER	Candidate name: CYRUS WESTERN	AT OUESTIONS/BLOCKS	IDENTIFY CANDIDATE TYPE STAT	See Order for proposed schedule and charges. See Invoice for actual schedule and charges. I, $CYRUS$ $WESTERN$, hereby request station time as follows
Date of Station Agreement to Sell Time: $8/3/20$	Name: JIM SCHELINGER	Signature: Ann Mchillenger	Station Representative	RIMINATION ON THE BASIS OF RACE OR ETHNICITY	y such person or entity; and luding applicable classes and rates, discount, promotion	nished by (check one box below): ndidate, or date listed above;			General Primary	REPRESENTATIVE HOUSE DISTRICT 5-1			ÜESTERN		SMUSTRECOMPLETED TO THE REMINES	FEDERAL CANDIDATE STATE OR LOCAL CANDIDATE	See Invoice for actual schedule and charges, hereby request station time as follows:

Federal Candidate Certification:

the office being sought and that the candidate has approved the broadcast broadcast or if radio programming, contains a personal audio statement by the candidate that identifies the candidate, the candidate approved the broadcast and that the candidate and/or the candidate's authorized committee paid for the for a duration of at least four seconds and a simultaneously displayed printed statement identifying the candidate, that to an opposing candidate or, if it does, (2) contains a clearly identifiable photograph or similar image of the candidate The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer

s reflecting this transaction to the OPIF or	Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPIF or	Upload order, this form and invoice
Run Start and End Dates: 8/14/20 - 8/18/20	Station Location: SHERIDAN, WYOMING	正St. 守.
Date Received/Requested: $8/3/20$	Station Call Letters: **KOE**	Contract #: 3/80-005
	y (e.g., insufficient sponsor ID tag):	Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):
complete.	*Upload partially accepted form, then promptly upload updated final form when complete	*Upload partially accepted form, t
D)*	Accepted Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)* Rejected – provide reason (optional):	Disposition: Accepted Accepted IN PART (e.g., ad copy not Rejected – provide reason (optional):
NA	ned (above): Yes No	Federal candidate certification signed (above):
	3/20	Date ad received:
	Yes No	Ad submitted to Station?
		Date: 8 3 2
	WESTERN	Name: CARUS
		Signature:
·	ittee/Agency	Candidate/Authorized Committee/Agency

of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPIF. purchased or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name use this space to document schedule of time purchased, when spots actually aired, the rates charged and the classes of time

Book and days

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