

New Client  New Order  
 Revision of Order  Add  Change

Order Number 3477-001

**Sheridan Media Broadcast Order**

Customer Number \_\_\_\_\_ Customer Agency \_\_\_\_\_

Advertiser Heyneman For House

- KROE (1)       KZWY (2)       KWYO (3)
- KYTI (4)       KLQQ (5)       OLDIES (6)
- EDGE (7)       FOX (8)       SMART (9)
- MAGIC (10)       INTERNET       GEO-DIGITAL

Address 4100 BIG HORN AVENUE

City SHERIDAN State WY Zip 82801

Contact JOHN HEYNEMAN Phone 307-429-2421 Fax \_\_\_\_\_

Local 7 POLITICAL Salesperson \_\_\_\_\_ E-mail john@heynemanforhouse.com  
 National 98 Product Code \_\_\_\_\_  
 Trade 1 Priority \_\_\_\_\_  
 Other 6 Affidavit type \_\_\_\_\_

Billing Type:  Monthly  End-of-Schedule **E.O.S.**  
 Weekly  Other

Billing:  Standard Broadcast  Calendar Month  
 Notary:  Yes  No

Co-op Billing?  Yes  No If yes, co-op description: WYOMING STATE REPRESENTATIVE HD30  
 Special Instructions: \_\_\_\_\_

BILL SPON SPOT	CART CART	TC PC PC	PRI	LEN LEN	START DATE START DATE	END DATE END DATE	PROGRAM# START TIME	POSITION# END TIME	RATE RATE RATE	M	T	W	T	F	S	S
1	335	98	1	:30	8/7/20	8/17/20	06:30	09:30	12.00	2	2	2	2	2		
2					8/7/20	8/17/20	10:00	13:00	9.25	1	1	1	1	1		
3					8/7/20	8/17/20	13:00	16:00	9.25	1	1	1	1	1		
4																
5																
6																
7																
8																
9																
10																

**TOTALS UNITS REVENUE**

BT= Billing Type-See Transaction Description List  
 PC= Product Code 1-99 (See List)  
 PRI= Priority Code (See List)

Spots & Programs      14      \$168.00  
                                  14      \$129.50  
                                  28      \$297.50


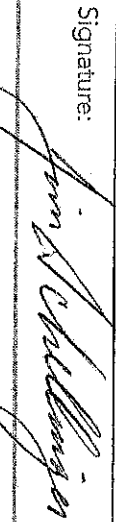
# CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.  
 I, JOHN HEYNEMAN, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE  **STATE OR LOCAL CANDIDATE**

FEDERAL CANDIDATE  
 STATE OR LOCAL CANDIDATE

**ALL QUESTIONS/BLOCKS MUST BE COMPLETED**

Candidate name:	<u>JOHN HEYNEMAN</u>		
Authorized committee:	<u>HEYNEMAN TAKIN' IT TO THE HOUSE</u>		
Agency requesting time (and contact information):	<input checked="" type="checkbox"/> N/A		
Candidate's political party:	<u>REPUBLICAN</u>		
Office sought (no acronyms or abbreviations):	<u>WYOMING STATE REPRESENTATIVE DISTRICT 30</u>		
Date of election:	<u>AUGUST 18, 2020</u>	<input type="checkbox"/> General	<input checked="" type="checkbox"/> Primary
Treasurer of candidate's authorized committee:	<u>SASHA JOHNSTON</u>		
The undersigned represents that:	(1) the payment for the broadcast time requested has been furnished by (check one box below): <input type="checkbox"/> the candidate listed above who is a legally qualified candidate, or <input checked="" type="checkbox"/> 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.		
<b>THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.</b>			
Candidate/Committee/Agency	Station Representative	Signature:	Signature:
			
Name: <u>JOHN HEYNEMAN</u>	Name: <u>JIM SCHELLINGER</u>		
Date of Request to Purchase Ad Time: <u>8/5/20</u>	Date of Station Agreement to Sell Time: <u>8/5/20</u>		

**Federal Candidate Certification:**

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

Candidate/Authorized Committee/Agency

Signature:

*J. M. Heylman*  
Name: JOHN HEYLMAN

Date: 8/5/20

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?  Yes  No

Date ad received: \_\_\_\_\_

Federal candidate certification signed (above):  Yes  No  N/A

Disposition:

- Accepted
- Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)\*
- Rejected – provide reason (optional): \_\_\_\_\_

\*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag): \_\_\_\_\_

Contract #:	3477-001	Station Call Letters:	KRDE	Date Received/Requested:	8/5/20
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Est. #:		Station Location:	SHERIDAN, WYOMING	Run Start and End Dates:	8/7/20 – 8/17/20
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Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPF 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 of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPF.



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

# KROE-AM Order Confirmation

**OrderID: 3477-001**

Sponsor: Heyneman For House  
 Product: Heyneman For House  
 Estimate/PO:  
 AccountRep: House/political  
 BillingCycle: End-of-Schedule  
 InvoiceType: Times/Rates  
 Run Dates: 8/7/2020 - 8/17/2020  
 Items Ordered: 28  
 Ordered Amount: \$297.50

HEYNEMAN FOR HOUSE  
 4100 BIG HORN AVE.  
 SHERIDAN, WY 82801

## Scheduled Station(s): KROE-AM Wyoming State Rep. HD 30

Printed 8/6/2020 2:17:03 PM

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Run Dates	Run Weeks	Run Times	Mo	Tue	We	Thu	Fri	Sat	Sun	Week Total	Length	Descriptio	Avail Type	Copy ID	Qty	Item Cost	Total Cost
01 8/7/2020 - 8/17/2020	All Weeks	06:30 AM - 09:30 AM	2	2	2	2	2			10	:30	Spot		335	14	12.00	168.00
02 8/7/2020 - 8/17/2020	All Weeks	10:00 AM - 01:00 PM	1	1	1	1	1			5	:30	Spot		335	7	9.25	64.75
03 8/7/2020 - 8/17/2020	All Weeks	01:00 PM - 04:00 PM	1	1	1	1	1			5	:30	Spot		335	7	9.25	64.75

### End-of-Schedule Projected Billing:

Jul-20	0.00	Aug-20	297.50	Sep-20	0.00	Q3-2020	297.50
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Guaranteed

Accepted for KROE-AM

Confirmed Correct; Payment