

## ***POLITICAL/ISSUE AVAIL REQUEST***

DATE: September 26, 2016

REQUESTED BY: Krista Murray, Buying Time

ADDRESS: 650 Massachusetts Avenue, NW, STE 210, Washington, DC 20007

TELEPHONE# 202-965-5060

ON BEHALF OF CANDIDATE/ISSUE: Wayne Goodwin

OFFICE/ISSUE: NC State Insurance Commissioner

PARTY AFFILIATION: Democrat

COMMITTEE: The Goodwin Committee

TREAS./CHAIRMAN: Shayne Thoman, Treasurer

ADDRESS: PO Box 27841, Raleigh, NC 27611

TELEPHONE# na

DATES AND TIMES REQUESTED: all

REMARKS: [www.waynegoodwin.org](http://www.waynegoodwin.org)

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## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ **FEDERAL CANDIDATE**

☒ **STATE/LOCAL CANDIDATE**

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

**Station and Location:**

WTVB Raleigh-Durham, NC

**Date:** 9/23/2016

I, Buying Time LLC,

being/on behalf of: Wayne Goodwin,

a legally qualified candidate of the Democratic

political party for the office of: NC State Insurance Commissioner

in the General

election to be held on: November 8, 2016

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
		AS	ORDERED		

**Attach proposed schedule with charges (if available): \$**

**net**

I represent that the payment for the above described broadcast time has been furnished by:

The Goodwin Committee

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:


Shayne Thoman

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

***To Be Signed By Candidate or Authorized Committee***

9/23/16  
Date

  
Signature

***To Be Signed By Station Representative***

☐ Accepted

☐ Accepted in Part

☐ Rejected

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title