



WTIC-TV

Check Date: 10/12/2012 Vendor: 0001013779 WTIC-TV Check No. 115934

Project Name: Friends of Elizabeth Esty Flight Dates: 10/16/2012 thru 10/22/2012

Invoice Number	Invoice Date	Voucher ID	Gross Amount	Discount Taken	Paid Amount
0019676510161022	10/12/2012	00196765	12,805.25	0.00	12,805.25

396137

T-R

<b>Totals</b>			\$12,805.25	\$0.00	\$12,805.25
---------------	--	--	-------------	--------	-------------



Washington Harbour  
3050 K Street, NW, Suite 100  
Washington, DC 20007  
202.338.8700

JPMORGAN CHASE BANK, N.A.  
Syracuse, NY

115934

50-937/213

Date 10/12/2012

Pay Amount \$12,805.25\*\*\*

Pay \*\*\*\*TWELVE THOUSAND EIGHT HUNDRED FIVE AND 25 / 100 DOLLAR\*\*\*\*

To The Order Of WTIC-TV  
One Corporate Center  
Hartford, CT 06103



*Rachyn V. Olson*

Authorized Signature

## 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**

<b>Station and Location:</b>	<b>Date:</b>
------------------------------	--------------

I, Maura Gilroy

being/on behalf of: Elizabeth Esty, a legally

qualified candidate of the Democrat political

party for the office of: House of Representatives

in the General

election to be held on: 11/6/12

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					

**Total Charges:**

For programming that, in whole or in part, "communicates a message relating to any political matter of national importance," list the matters below:

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

Friends of Elizabeth Esty

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:

Patricia Flynn Harris PO Box 61 Cheshire CT 06410

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**

9/24/12                      [Signature]  
Date    Signature

**To Be Signed By Station Representative**

Accepted                       Accepted in Part                       Rejected

\_\_\_\_\_  
Signature                                      Printed Name                                      Title

### CANDIDATE CERTIFICATION

**In Order For Federal Candidates to Receive The Lowest Unit Charge During a Political Window, the Following Certification is Required:**

I, Maura Gurray  
(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

does  does not

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

- the 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.
- the television programming 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.

M. Gurray  
signature of candidate or authorized committee

Maura Gurray 9/24/12  
printed name date

## AGREED UPON SCHEDULE

(TO BE FILLED IN ONLY IF STATION DOES NOT ACCEPT ALL OF  
CANDIDATE'S REQUEST)

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

**Total Charges:**

### AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

- (1) actual air time and charges for each spot;
- (2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- (3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

**Note:** Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.