

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Kelly Polce, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE →



FEDERAL CANDIDATE



STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Joe Biden

Authorized committee:

Joe Biden for President

Agency requesting time (and contact information):

☐ N/A GMMB

Candidate's political party:

Democratic

Office sought (no acronyms or abbreviations):

President

Date of election:

11/3/2020



General



Primary

Treasurer of candidate's authorized committee:

Greg Schultz

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 (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.

Candidate/Committee/Agency

Signature:

Kelly Polce

Name: Kelly Polce

Date of Request to Purchase Ad Time: 9/14/2020

Station Representative

Signature:

Paul Binsfeld

Name:

Paul Binsfeld

Date of Station Agreement to Sell Time:

9/21/20

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:

Kelly Polce

Name: Kelly Polce

Date: 9/14/2020

TO BE COMPLETED BY STATION ONLYAd submitted to Station? ☒ Yes ☐ No Date ad received: 9/21/20**Note: Must have separate PB-19 Forms for each version of the ad (i.e., for every ad with differing copy).**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:

*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):

See Attached

Contract #:

Station Call Letters:

Date Received/Requested:

Est. #:

Station Location:

Run Start and End Dates:

Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPIF 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 OPIF.

Confirmation



WTCM-AM
PO BOX 472 - 314 E Front Street
Traverse City MI 49685
231-947-7675

Contract # 43546
Date Entered 09/21/20
Sales Person Paul Binsfeld
Billing Cycle Broadcast
Conflict 1 Political
Product CANDIDATE/9269
Estimate # 9269
P.O. # 34358489
Contract 09/22/20 - 09/28/20

JOE BIDEN FOR PRESIDENT (KMG)KA
C/O KATZ MEDIA GROUP
125 W 55TH ST - 3RD FLOOR
NEW YORK NY 10019

Station	Date Range	Time Range	Len	Schedule	Repeated	Rate	Qty	Total
WTCM-AM	09/22/20-09/28/20	06:00-10:00	01:00	3,3,3,3,3,0,0	All Weeks	57.00	15	855.00
Subtotal								855.00
Agency Commission								128.25
Total								726.75

Projected Billing		Count	Gross	Net
September	2020	12	684.00	581.40
October	2020	3	171.00	145.35
		15	855.00	726.75

Customer _____ Sales Person _____

Printed 09/22/20 08:43:26

Advertiser hereby certifies to Radio Station that the advertising being placed on Radio Station does not have a purpose of discrimination on the basis of race, creed or gender. Radio Station maintains a strict policy of non-discrimination on the basis of race, ethnicity, gender or creed in any of its advertising contracts or in any other aspect of its business operations. Call 231-947-7675 for more details.

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