

BCRA Political Record

This Political Record is required by the Bipartisan Campaign Reform Act of 2002 (BCRA) to be completed every time a request is made to purchase broadcast time that (1) is made by or on behalf of a legally-qualified candidate for public office, or (2) communicates a message relating to any political matter of national importance, including references to a legally qualified candidate, any election to federal office, or a national legislative issue of public importance. The Political Record is not required for requests to purchase internet advertising. Once completed, the Political Record must be placed in the station's political file and must be retained for two years.

This Record is for	<input type="radio"/> a candidate request	The request was	<input type="radio"/> accepted #
	<input checked="" type="radio"/> an issue request		<input type="radio"/> rejected

Candidate Named in Message:

Office Being Sought:

Election or Issue Referred to: *CRESCENT FIRE PROTECTION BENEFIT ASSESSMENT*

Sponsor (or authorized candidate committee): *CRESCENT CITY FIRE AND RESCUE VOLUNTEER*

Treasurer of authorized candidate committee: *BECKY BARLOW*

Person Ordering Advertising: *RAY ROOK* *FIRE FIGHTER ASSOCIATION*

* An "issue request" is a message purchased by someone other than a candidate or a candidate's authorized committee related to any political matter of national importance, including references to a legally qualified candidate, any election to Federal office, or a national legislative issue of public importance.

If the request is accepted, attach the sales order showing the rate charged, the date(s) and time(s) the message is aired, and the class of time purchased. For an issue request, also attach the name, address, and phone number of a sponsor contact person, and a list of the chief executive officers or similar officials.

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: KPOD AM CRESCENT CITY, CA	Date: 4/29/21
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I, Ray Rook
do hereby request station time concerning the following issue:

CRESCENT FIRE PROTECTION BENEFIT ASSESSMENT

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

Total Charges:

This broadcast time will be used by: CRESCENT CITY FIRE AND RESCUE VOLUNTEER FIRE FIGHTER ASSOCIATION

Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"

Yes
 No

For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):

NA

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)

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

CRESCENT CITY FIRE AND RESCUE VOLUNTEER FIRE FIGHTER ASSOCIATION

and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:

a corporation; a committee; an association; or other unincorporated group.

The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least 2 DAYS before the time of the scheduled broadcasts.

TO BE SIGNED BY ISSUE ADVERTISER

4/23/21
Date

[Signature]
Signature

707 554-0350
Contact Phone Number

TO BE SIGNED BY STATION REPRESENTATIVE

Accepted

Accepted in Part

Rejected

[Signature]
Signature

LARRY TIMPE
Printed Name

GENERAL MANAGER
Title



KPOD LLC
A Bicoastal Media Company

BROADCAST ORDER

KPOD AM
 KPOD FM
 KCRE FM
 OTHER

Account Name: Crescent City Fire and Rescue Volunteer Assoc. Account Executive: Larry Timpe
 Co-op/Est # POLITICAL Date: 4/28/2021 New: XX Add-on _____
 Agency: Fire Protection Benefit Assess. Discount: _____ Contact Person: Ray Rook Billing B / C / EOS
 Address: 255 W. Washington Blvd Telephone: 707-954-0350 Fax: _____
 City/State/Zip Crescent City, CA 95531 Email: _____
 Start Date: 4/30/2021 End Date: 6/12/2021 Customer # _____ Cart # _____

Station/ Program	Spot Length	Run Dates		Run Times		Spot Rate	Schedule							Total Spots		Amount	
		Start	End	From	To		M	T	W	Th	F	Sa	Su	Week	Line	Week	Line
<i>Booster plan is scheduled \$399 4/30 - 5/5</i>																	\$399
All	30	4/30	5/2	5a	11p								4	4	4	12	
All	30	5/3	5/5	5a	11p		4	4	4							12	
All	30	5/10	5/14	6a	9a	\$33	1		1		1				3		\$99
All	30	5/18	5/20	6a	9a	\$33		1		1					2		\$66
All	30	5/24	5/28	6a	9a	\$33	1		1		1				3		\$99
All	30	6/1	6/3	6a	9a	\$33		1		1					2		\$66
<i>Booster plan is scheduled \$399 6/7 - 6/12</i>																	
All	30	6/7	6/12	5a	11p		4	4	4	4	4	4			24		\$399

Advertiser will make payment by the tenth of the month following broadcast, and in the event of delinquency will bear collection costs including attorney's fees. Schedule may be cancelled by either station or advertiser in 30 days written notice, except that station may cancel at any time in event of delinquency. If cancelled by advertiser, or if station cancels because of non-payment, the advertiser will be billed at rate earned.

Non-Discrimination. Bicoastal Media does not discriminate on the basis of race, gender or ethnicity in the placement, scheduling and completion of purchase advertising. Any order for advertising that includes any such restriction will not be accepted.

Total Order \$ \$1,128.00

Special Instructions:

Paid by Check

Crescent City Fire and Rescue Volunteer
Fire Fighter Association

Accepted By Station: _____ Accepted By Account: _____
 Signature: _____ Date: _____ Signature: _____ Date: _____
 Manager Approval: _____ Name: Ray Rook Title: _____

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
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