

# Sales Order

Station: **KKQQ-FM** Contract#: **(none)** Agency: **Katz Media Group (EI)**  
 Contract Name: **NOEM FOR GOV OCT K** Address: **125 W 55th Street**  
 Proposal#: **8DC1A74B-F324-4B32-9200-8D61D2C552E** **3rd Floor**  
**7** **124664** City: **New York** State: **NY** Zip: **10019**  
 Start Date: **10/11/22** End Date: **10/24/22** Buyer: \_\_\_\_\_  
 Revenue Type: **National Sales** Type: **Cash** Tax Schedule: \_\_\_\_\_ **(None)**  
 Advertiser: **KRISTI NOEM FOR GOVERNOR** Agency Commission %: **15**  
 Address: \_\_\_\_\_ Billing Cycle: **Standard**  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Salesperson: **5170KATZ** Comm %: **0**  
 Product Name: **Noem for GOV** Makegood Policy: **Within Contract Dates**  
 Estimate #: **na**  
 Agency Client Code: **na**  
 Competitive Code: **Political**

10244

No	DATES		Alt wks	TIMES		LEN	DISTRIBUTION								RATE	TOTALS		PTY	
	START	END		START	END		M	T	W	T	F	SA	SU	Per Wk		D/W	SPOTS		\$\$
1	10/11/22	10/17/22		6:00 AM	10:00 AM	60		1	1		1			3	D	20.70	3	62.10	0
2	10/11/22	10/24/22		6:00 AM	7:00 PM	60						2	2	4	D	24.52	8	196.16	0
3	10/11/22	10/17/22		10:00 AM	3:00 PM	60	1			1				2	D	18.40	2	36.80	0
4	10/11/22	10/17/22		3:00 PM	7:00 PM	60	1	1	1		1			4	D	18.40	4	73.60	0
5	10/18/22	10/24/22		6:00 AM	10:00 AM	60			1		1			2	D	20.70	2	41.40	0
6	10/18/22	10/24/22		10:00 AM	3:00 PM	60	1	1		1				3	D	18.40	3	55.20	0
7	10/18/22	10/24/22		3:00 PM	7:00 PM	60	1		1	1				3	D	18.40	3	55.20	0

Billing Projections: By Month

Oct 22  
 CA 520.46  
 ST 520.46

Print Spot Prices

TOTAL SPOTS ..... 25  
 GROSS TOTAL \$ ..... 520.46  
 ADJUSTED SPOTS ..... 25  
 ADJUSTED TOTAL \$ ..... 520.46

APPROVE DECLINE

- General Manager
- Sales Manager
- Business Manager
- Traffic Director

## CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Strategic Media Placement, hereby request station time as follows:

**IDENTIFY CANDIDATE TYPE**

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

### ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: KRISTI NOEM	
Authorized committee: KRISTI FOR GOVERNOR	
Agency requesting time (and contact information): <input type="checkbox"/> N/A Strategic Media Placement	
Candidate's political party: REPUBLICAN	
Office sought (no acronyms or abbreviations): GOVERNOR OF SOUTH DAKOTA	
Date of election: NOVEMBER 8, 2022	<input checked="" type="checkbox"/> General <input type="checkbox"/> Primary
Treasurer of candidate's authorized committee: KEVIN BROGHAMER	
<p>The undersigned represents that:</p> <p>(1) the payment for the broadcast time requested has been furnished by (check one box below):</p> <p><input type="checkbox"/> the candidate listed above who is a legally qualified candidate, or</p> <p><input checked="" type="checkbox"/> the authorized committee of the legally qualified candidate listed above;</p> <p>(2) this station is authorized to announce the time as paid for by such person or entity; and</p> <p>(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices.</p> <p><b>THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.</b></p>	
Candidate/Committee/Agency	Station Representative
Signature: A Brant Fink <small>Digitally signed by A Brant Fink Date: 2022.06.28 08:57:20 -04'00'</small>	Signature:
Name: BRANT FINK	Name:
Date of Request to Purchase Ad Time: 10/7/22	Date of Station Agreement to Sell Time: 10/10/22

**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:

Name:

Date:

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?  Yes  No

Date ad received: 10/10/22

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 #: 124664

Station Call Letters: WXXX-FM

Date Received/Requested: 10/10/22

Est. #:

Station Location: Burlington CO

Run Start and End Dates: 10/11/22-10/29/22

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.