## CANDIDATE ADVERTISEMENT AGREEMENT FORM

See <b>Order</b> for proposed schedule and charges. See <b>Invoice</b> for actual schedule and charges.	
I, FlexPoint Media, hereby request station time as follows:	
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE  STATE OR LOCAL CANDIDATE  ALL QUESTIONS/BLOCKS MUST BE COMPLETED	
Candidate name:	
Ron DeSantis; Ashley Moody; Jimmy Patronis	
Authorized committee:	
Republican Party of Florida	
Agency requesting time (and contact information):	
N/A FlexPoint Media, PO Box 1051, New Albany, OH 43054	
Candidate's political party:	
Republican	
Office sought (no acronyms or abbreviations):	
Florida Governor; Attorney General; & Chief Financial Officer	
Date of election:	✓ General Primary
11/8/22	
Treasurer of candidate's authorized committee:	
Mike Moberly	
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	Station Representative
Signature:	Signature: Adam Schorr
flexPoint Media	
Name: FlexPoint Media	Name: Adam Schorr
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## 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: Not Applicable Date: TO BE COMPLETED BY STATION ONLY Ad submitted to Station? No Date ad received: 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): Station Call Letters: Contract #: Date Received/Requested: **MXAX** 10-31-22 Est. #: Station Location: Tampa Run Start and End Dates: 4010 11/1 - 11/8 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.