

Political Broadcast Agreement Form for Candidate Advertisements (PB-19)



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Please note:

You will be prompted to save this form after each entry of your electronic signature. Make sure to re-save the form if you enter any information after entering your electronic signature.

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A companion to this form is NAB's Political Broadcast Catechism. To assist with your understanding of the political advertising rules, an all-new Political Advertising Primer course will become available via Broadcast Education in March 2020.

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CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Allan Novstrup, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE 

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Allan Novstrup

Authorized committee:

Novstrup for State Senate

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

State Senate

Date of election:

General

Primary

Treasurer of candidate's authorized committee:

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: <u>Allan Novstrup</u>	Signature: <u>Kristan Morris</u>
Name: <u>Allan Novstrup</u>	Name: <u>Kristan Morris</u>
Date of Request to Purchase Ad Time: <u>4/12/2024</u>	Date of Station Agreement to Sell Time: <u>4/12/2024</u>

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: 4-12-2024

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):

Contract #: See Att	Station Call Letters: See Att	Date Received/Requested: See Att
Est. #: See Att	Station Location: See Att	Run Start and End Dates: See Attach

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.



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CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Carl E Perry, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE 

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Carl Perry

Authorized committee:

Carl Perry for State Senate

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

Senator

Date of election:

June 4,

General

Primary

Treasurer of candidate's authorized committee:

Mark Engelhart

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:

Carl E Perry

Signature:

Kristan Morris

Name:

Carl Perry

Name:

Kristan Morris

Date of Request to Purchase Ad Time:

Date of Station Agreement to Sell Time:

4/12/24

Federal Candidate Certification:

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Candidate/Authorized Committee/Agency

Signature:

Name:

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No Date ad received: 4-12-2024

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
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- 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):

Contract #: <u>See Att.</u>	Station Call Letters: <u>See Att.</u>	Date Received/Requested: <u>See Att.</u>
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CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Brandei Schaeffbauer, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE 

- FEDERAL CANDIDATE
- STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: ~~Brandei For House~~ Brandei Schaeffbauer

Authorized committee: Brandei For House

Agency requesting time (and contact information):

N/A

Candidate's political party: Republican

Office sought (no acronyms or abbreviations): House of Representatives

Date of election: November 5, 2024 General Primary

Treasurer of candidate's authorized committee: BJ Schaeffbauer

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;

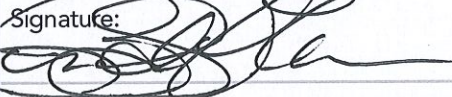
(2) this station is authorized to announce the time as paid for by such person or entity; and

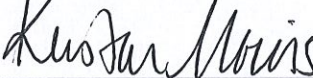
(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices (not applicable to federal candidates).

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: 

Name: Brandei Schaeffbauer

Name: Kristan Morris

Date of Request to Purchase Ad Time:

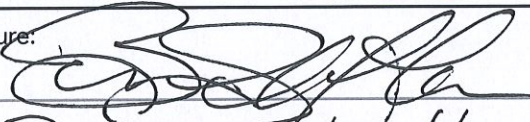
Date of Station Agreement to Sell Time: 4/12/2024

Federal Candidate Certification:

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Candidate/Authorized Committee/Agency

Signature:



Name: Brandei Schaefferbauer

Date:

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station? Yes No Date ad received: 4-12-2024

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)*
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Contract #: <u>See ATT</u>	Station Call Letters: <u>See ATT</u>	Date Received/Requested: <u>See ATT</u>
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Hub City Radio
 3304 S US HIGHWAY 281
 ABERDEEN, South Dakota 57401-8792
 Phone: (605) 229-3632
 Email: frontoffice@hubcityradio.com



Carl, Al & Brandei D3 Team
 2722 Railroad Circle
 Aberdeen, South Dakota 57401

Advertiser: Carl, Al & Brandei D3 Team
 Order #: 3032246950269
 Contract #: 53124
 Date Entered: 04/12/2024
 Last Modified: 04/12/2024
 Product: D3 Team Advertising KGIM AM
 Salesperson: Kristan Political
 Billing Cycle: Calendar Month
 Estimate #:

Order Date Range: 04/19/2024 through 06/04/2024 (7 weeks)
 Media Outlets: KGIM-AM

On-Air Schedule

#	Dates	Station	Time/Program	Len	Mo	Tu	We	Th	Fr	Sa	Su	S/W	Rate	Qty	Total
1	05/13/24-06/04/24	KGIM-AM	06:00AM-12:00AM	30	--	5	--	5	--	5	--	15	4.50	50	225.00
2	04/19/24-04/27/24	KGIM-AM	06:00AM-12:00AM	30	--	5	--	5	--	5	--	15	4.50	20	90.00

Station Totals

Station	On-Air Count	Digital Count	Web Count	Other Count	Gross Billing	Net Billing
KGIM-AM	70	0	0	0	\$315.00	\$315.00
Totals	70	0	0	0	\$315.00	\$315.00

Total Charges: \$315.00
Total Net: \$315.00

Non-Discrimination. Prairie Winds Broadcasting does not discriminate on the basis of race or ethnicity in the sale, placement, or scheduling of advertising. Any order for advertising that includes any such restriction will not be accepted. Times are approximate within 8 minutes.

Projected Billing By Calendar Month

Month	Year	Gross Billing	Net Billing
April	2024	\$90.00	\$90.00
May	2024	\$180.00	\$180.00
June	2024	\$45.00	\$45.00
Totals		\$315.00	\$315.00

Accepted for Hub City Radio

Accepted for advertiser OR agency as agent for the advertiser

Name _____

Title _____

Name _____

Title _____