

# Confirmation



**BICOASTAL**  
ROGUE VALLEY, LLC

Bicoastal Media, LLC (Medford,  
OR)  
3624 Avion Drive  
Medford OR 97504

Contract # 35793  
Date Entered 08/03/22  
Sales Person HOUSE Account  
Billing Cycle Calendar  
Revenue Source Local Direct 20-4025/4026  
Revenue Type Cash  
Product Radio  
Estimate # Bentz Veterans  
P.O. # Bentz 0822  
Contract 08/05/22 - 09/07/22

CLIFF BENTZ OFFICE IS OPEN  
ATTN NICK STRATER

Station	Date/Time	Schedule	Len	P	Avail Type	Rate	Qty	Total
1 KMED-AM	08/05/22-09/07/22 12:00a-11:59p	20xMTWThFSSu All Weeks	00:30	5	Commercial	10.00	120	1200.00
2 KCMD-FM	08/05/22-09/07/22 12:00a-11:59p	20xMTWThFSSu All Weeks	00:30	5	Commercial	10.00	120	1200.00
3 KLDZ-FM	08/05/22-09/07/22 12:00a-11:59p	20xMTWThFSSu All Weeks	00:30	5	Commercial	10.00	120	1200.00
4 KYVL-FM	08/05/22-09/07/22 12:00a-11:59p	10xMTWThFSSu All Weeks	00:30	5	Commercial	10.00	60	600.00
5 KRWQ-FM	08/05/22-09/07/22 12:00a-11:59p	10xMTWThFSSu All Weeks	00:30	5	Commercial	10.00	60	600.00
Total								4800.00

Station Summary	Count	Gross	Net
KMED-AM	120	1200.00	1200.00
KCMD-FM	120	1200.00	1200.00
KLDZ-FM	120	1200.00	1200.00
KYVL-FM	60	600.00	600.00
KRWQ-FM	60	600.00	600.00

Projected Billing	Count	Gross	Net
August 2022	359	3590.00	3590.00
September 2022	121	1210.00	1210.00
	480	4800.00	4800.00

Customer \_\_\_\_\_ Sales Person \_\_\_\_\_

Printed 08/03/22 13:43:56

Page 1 of 1

*[Signature]* 8/3/2022

# CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Cliff Ruiz, hereby request station time as follows:

## IDENTIFY CANDIDATE TYPE

**FEDERAL CANDIDATE**

STATE OR LOCAL CANDIDATE

**ALL QUESTIONS/BLOCKS MUST BE COMPLETED**

**Candidate name:**

diff Benz

Authorized committee:

Fonte for House

**Agency requesting time (and contact information):**

☐ N/A

Candidate's political party:

105-31.000

Office sought (no acronyms or abbreviations):

Date of election:

## General

Primary

11/4/2022

**Treasurer of candidate's authorized committee:**

17.04.50

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: H. J. Smith

Name: GRANT L. FINE

Date of Request to Purchase Ad Time: 4/3/2023

Date of Station Agreement to Sell Time: 4/3/2021

**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:

8/3/2022

**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 #:

35793

Station Call Letters:

1CMTD/1CCMD/KYU/14WU/KLDZ

Date Received/Requested:

8/3/2022

Est. #:

Station Location:

MEDFORD MASSACHUSETTS

Run Start and End Dates:

8/9/2022 9/2/2022

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.

VETERANS SERVICES AVAILABLE IN MEDFORD.