

RECORD OF REQUEST FOR PURCHASE OF POLITICAL TIME

CANDIDATE/AUTHORIZED COMMITTEE FORM

FORM TO BE COMPLETED AT TIME OF ORDER AND PLACED IN POLITICAL/ PUBLIC INSPECTION FILE

1. **Date of Request:** 1/16/2018
2. **Name of Agency making the Request:** Canal Partners Media
3. **Address of Agency making the Request:** 25 Whitlock Pl SW Suite 200
Marietta, GA 30064
4. **Name of Agency Contact making the Request:** Jamie Sterling
5. **Telephone Number of Agency Contact making the Request:** 770-427-0735
6. **Name of Candidate:** Philip Levine
7. **Name of Candidate's Authorized Committee:** Levine for Governor
8. **Name of Treasurer of Candidate's Committee:** James Krammer
9. **Legally-Qualified Candidate for the Office of:** Governor
In the State/District/City/other of: Florida
10. **Election:**

PRIMARY ELECTION <input checked="" type="checkbox"/>	Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other <input type="checkbox"/>
GENERAL ELECTION <input type="checkbox"/>	Democrat <input type="checkbox"/> Republican <input type="checkbox"/> Other <input type="checkbox"/>
CAUCUS <input type="checkbox"/>	Democrat <input type="checkbox"/> Republican <input type="checkbox"/> Other <input type="checkbox"/>
11. **Request to Purchase Time:** ☐ ACCEPTED BY SYSTEM ☐ REJECTED BY SYSTEM
12. **Reason for Rejection:**

13. **If request to purchase time is ACCEPTED attach a copy of (i) the Insertion Order/Agreement including schedule of time purchased, rates charged, class of time purchased, (ii) Invoice, and (iii) Affidavit of Performance indicating dates and times the advertisement aired.**

Signed: _____
Signature of Individual Receiving Request

Date: _____