

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Tom Anderson / Optima Public Relations, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE	<input type="checkbox"/>	FEDERAL CANDIDATE
	<input checked="" type="checkbox"/>	STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Glenda Ledford	
Authorized committee: Ledford for Mayor 189 E Nelson Ave #182 Wasilla, AK 99654	
Agency requesting time (and contact information): <input type="checkbox"/> N/A Optima Public Relations / Tom@OptimaPublicRelations.com / Office # 907-202-5516	
Candidate's political party: Non-Partisan Election	
Office sought (no acronyms or abbreviations): City of Wasilla / Mayor	
Date of election: Tuesday October 6, 2020	<input type="checkbox"/> General <input type="checkbox"/> Primary
Treasurer of candidate's authorized committee: Glenda Ledford	
The undersigned represents that: (1) the payment for the broadcast time requested has been furnished by (check one box below): <input checked="" type="checkbox"/> the candidate listed above who is a legally qualified candidate, or <input type="checkbox"/> 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.	
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: Tom Anderson / Optima Public Relations	Name: Erin Noonan
Date of Request to Purchase Ad Time: 9/28/20	Date of Station Agreement to Sell Time: 9/29/20

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

Advertiser/Sponsor	Station Representative
Signature:	Signature: <i>Erin Noonan</i>
Name:	Name: Erin Noonan
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: 9/29/20

TO BE COMPLETED BY STATION ONLY

Ad submitted to station? Yes No Date ad received: 9/29/20

Note: Must have separate PB-19 forms for each version of the ad (i.e., for every ad with differing copy).

If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.

Disposition:

- Accepted
- Accepted IN PART (e.g., ad not received to determine content)*
- Rejected – provide reason:

*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any:

Contract #: 1410	Station Call Letters: KMVN	Date Received/Requested: 10/29/20
Est. #:	Station Location: Anchorage	Run Start and End Dates: 9/30-10/6/20

For national issue ads only (not required for state/local issue ads):

Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.