CANDIDATE REQUEST FOR POLITICAL BROADCAST INFORMATION OR TIME

| Date of Request:5.03.25 | Time of | Request: | 9:53am |
|--|-------------|------------------|---------------------|
| Candidate Name: Amanda Cochran | | | |
| Party: REP | | | |
| Candidate for: County Comisoner 5 Lee County (Office) (Location) | | | |
| Candidate's Authorized Committee: | | | |
| Treasurer of Candidate's Authorized Committee:Eric Robinson' | | | |
| Address: 133 Harbor Dr S Venice, FL 34285 | | | |
| Telephone: | | | |
| Agency for Candidate (if any): Cecilman Advertising | | | |
| Name of Person Requesting Information/Time: Rick Cecil | | | |
| Information Requested: | | | |
| Rates for WJPT | | | |
| Availabilities for | | | |
| Other: | | | |
| Disposition of Request: | | | |
| X Accepted Rejected Accepted | f or Reject | ed in part (atta | ch explanation) |
| Disclosure Statement Provided by Station | Yes | No | Previously provided |
| Certificate (for federal candidates only) Provided | d | | Previously provided |
| | Yes | No | Previously provided |
| Other Information: | 70 | | |
| Inquiry Received By: Kristin Brandt | | | |