## CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See Invoice for actual schedule and charges.
SAM GOLDSTEW	, hereby request station time as follows:
1	
FEDE	RAL CANDIDATE
IDENTIFY CANDIDATE TYPE STATE	OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED
Candidate name: DONALD PAINWATE	2
Authorized committee: MIJWATER FR	INDIANA
Agency requesting time (and contact information):	
N/A	
Candidate's political party:  LT3 FL TAZ 1	~~
The progress of the second sec	
GOVERNUT	OF INDIAA  General Primary
Date of election:	General Primary
Treasurer of candidate's authorized committee:	110.55
MICHAEL SCHALT	HC(3)
The undersigned represents that:	
(1) the payment for the broadcast time requested has been fur	nished by (check one box below):
the candidate listed above who is a legally qualified car	ndidate, or
the authorized committee of the legally qualified candi	date listed above;
(2) this station is authorized to announce the time as paid for b	y such person or entity; and
(3) this station has disclosed its political advertising policies, inc	luding applicable classes and rates, discount, promotion
and other sales practices (not applicable to federal candidate	res).
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY
Candidate/Committee/Agency	Station Representative
Signature:	Signature: Jani Wallerich Name: Tami Wallerich
Name: Sombous STEU, Comprison Mary Ste	Name: Tami Wallerich
Data of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: / 5///-

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:										
TC	BE COMPLETED BY STATION OF	NLY								
Ad submitted to Station? Yes	s No									
Date ad received:										
Federal candidate certification signed (ab	pove): Yes No	N/A								
Disposition:  Accepted  Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*  Rejected – provide reason (optional):										
*Upload partially accepted form, then pr	omptly upload updated final form when co	omplete.								
Date and nature of follow-ups, if any (e.g	., insufficient sponsor ID tag):									
Contract #: 2693-60004	Station Call Letters:  WMYK	Date Received/Requested:								
Est. #:	Station Location: 120 komo - Bunker Hill	Run Start and End Dates: 10/17/20-10/23/20								
use this space to document schedule of t	affic system print-out) or other documents time purchased, when spots actually aired, will not upload the actual times spots aired t information immediately should be placed	d until an invoice is generated, the name								

## TRAFFIC ORDER FORM

									se		Total Ads	∞	10	10	c	»	9	9	α	9	10					
									Supress Rates		Line Total \$   1		\$150.00	\$150.00	943	\$72.00	\$110.00	\$110.00	00 888	\$160.00	\$160.00			\$1,080.00		
									Package 🗌 🔞		#/Weeks	-	-	1	7	-		-	-	-	-			\$1,0		
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10/16/2020	10/23/2020	NonRillable								@rainw	Tue		2	7		,	7	7		2	2					
1	5	N				Zip: 46033				mahon(	Mon		2	2		,	7	7		2	2			\$1,080.00		
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Today'	Last Run Date:	Loc/Pol Promo			PMB105		Fax#:	Product Code:	Vendor Name:	Email:	Daypart/Time	6 am - 7 pm	6 am - 10 am	3 pm - 7 pm	Ram - 7 pm	0 all - / plii	o am - 10 am	3 pm - / pm	6 am - 7 pm	6 am - 10 am	3 pm - 7 pm			Total Gross\$		
	2020		]		Address: 1950 E. Grayhound Pass Suite 18 PMB105	St					End Date	10/18/20	10/23/20	10/23/20	10/18/20	10/10/20	10/23/20	10/23/20	10/18/20	10/23/20	10/23/20					
	10/17/2020	Loc/Agy Nat/Pol	or Indiana		ayhound Pa		.23		3 CO-0P?	ahon	Start Date	10/17/20	10/19/20	10/19/20	10/17/20	40/40/20	_	10/18/70	10/17/20	10/19/20	10/19/20			í		
Order #	First Run Date:		Advertiser: Rainwater for Indiana		1950 E. Gra	City: Carmel	Phone#: 317-345-5423		IS THIS ORDER CO-OP?	Contact: Evan McMahon	Rate	\$10.00	\$15.00	\$15.00	00 0\$	27.00	911.00	00.11.4	\$11.00	\$16.00	\$16.00			84	Client Signature:	Sales Manager:
	First	Loc/Dir National	Advertiser: <u>[</u>	Agency:	Address	City: 0	Phone#:	AE:	IS T	Contact:	Station	WMYK			IOIN				NZWZ					Total Ads	Client	Sale

HOOSIER AM/FM LLC KOKOMO WZWZ WIOU WMYK

P.O. BOX 2208

KOKOMO, IN 46904-2208

765-453-1212

Order #:

2693-00004

Description:

Date Entered:

10/16/2020

P.O.#:

Salesperson:

HOUSE, ACCOUNT

Invoice Frequency: Billed at end of Cal/EOS, Sorted by Date

Phone/Fax:

317-345-5423

RAINWATER FOR INDIANA Attn: EVAN MCMAHON 1950 E GRAYHOUND PASS SUITE 18 PMB105 CARMEL, IN 46033

October

2020

**On-Air Schedule** 

	Start Date	End Date	Station	Scheduled 7	Time/Event	Repeated	Length	Qty	Rate	Total	M	<u>Tu</u>	W	<u>Th</u>	<u>F</u>	<u>Sa</u>	<u>Su</u>	
1	10/17/2020	10/18/2020	WMYK-FM	06:00:00a	to 07:00:00p	Weekiy	1.00	8	10,00	80,00	0	0	0	0	0	4	4	
2	10/19/2020	10/23/2020	WMYK-FM	06:00:00a	to 10:00:00a	Weekly	1.00	10	15.00	150.00	2	2	2	2	2	4	4	
3	10/19/2020	10/23/2020	WMYK-FM	03:00:00p	to 07:00:00p	Weekly	1:00	10	15.00	150.00	2	2	2	2	2	4	4	

\$380.00 Order Start Date: 10/17/2020 Spots: 28 **Total Charges:** Order End Date: 10/23/2020

Projected Calendar Month/End-Of-Schedule Billing Totals for RAINWATER FOR INDIANA / 2693-00004 :

Spot Count

28

Net Billing \$380.00

Confirmed & Accepted for HOOSIER AM/FM LLC KOKOMO WZWZ WIOU WM

Accepted for RAINWATER FOR INDIANA By:

Please Sign and Return One Copy