


STATION KKJG-FM	REVENUE TYPE Political Direct	CONTRACT TYPE Regular	BILLING TYPE Calendar	SALE TYPE Standard	CONTRACT # 7424
MAILING ADDRESS YES ON MEASURE G 1745 ROCHELLE WAY OCEANO, CA 93445		AGM California 3620 Sacramento Drive Suite 204 San Luis Obispo, CA 93401			REF # 7222 REV # 1 PRINT DATE 10/30/2018 2:59:44 PM
BUYER	START 10/15/2018	END DATE 11/5/2018	REVISION DATE 10/12/2018	PRODUCT YES ON G - PROTECT SLO COUNTY	 <b>98.1 fm</b> <small>TEAM'S BEST COUNTRY</small> <b>Sales Contract</b>
ADVERTISER YES ON MEASURE G	ACCOUNT EXECUTIVE KATHY SIGNORELLI	OFFICE San Luis Obispo	P.O. #	Client Product	

STA Line	TYPE	DAY	SCHEDULE - TIME	START	FINISH	START	FINISH	P	ALT	LEN	SPW	Mo	Tu	We	Th	Fr	Sa	Su	RATE	OCC	L RATE
1	COM	Mo-Fr	6A-10A MON-FRI	06:00	10:00	10/15/2018	11/2/2018	2		15	5	1	1	1	1				37.00	15	555.00
2	COM	M	6A-10A MON-FRI	06:00	10:00	11/5/2018	11/5/2018	2		15	1	XX							37.00	1	37.00
3	COM	Mo-Th	10A-3P MON-FRI	10:00	15:00	10/15/2018	11/1/2018	2		15	4	1	1	1	1				37.00	12	444.00
4	COM	Mo-Th	3P-7P MON-FRI	15:00	19:00	10/15/2018	11/1/2018	2		15	4	1	1	1	1				37.00	12	444.00
5	COM	M	3P-7P MON-FRI	15:00	19:00	11/5/2018	11/5/2018	2		15	1	XX							37.00	1	37.00

Total Occasions 41

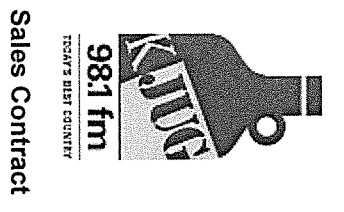
Gross \$1,517.00

Contract Total \$1,517.00

Accepted For Advertiser: \_\_\_\_\_

**READ BEFORE SIGNING/CONTRACTUAL AGREEMENT.**  
TERMS: NET 30 DAYS due and payable on the 15th of the month following broadcast. Accounts 120 days past due are subject to collection action with AGM CA, LLC. It is agreed that the undersigned enter into this agreement understanding the terms as outlined and shall be liable for all charges incurred on our behalf per this written agreement. I/We agree to pay all necessary fees and collection costs in the event that the above account with AGM CA, LLC is turned over to legal for collection. I/We understand that early cancellation of this contract must be in writing 30 days prior to cancellation date and is subject to pro-rated charges for any discounts applies. We/I agree to personally and severally guarantee payment of any and all products and services associated with this contract. AGM CA, LLC and this agreement do not discriminate on the basis of race or ethnicity.

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MAILING ADDRESS YES ON MEASURE G 1745 ROCHELLE WAY OCEANO, CA 93445		AGM California 3620 Sacramento Drive Suite 204 San Luis Obispo, CA 93401			REF # 7222
					REV # 1
					PRINT DATE 10/30/18 2:59:44 PM
BUYER	START 10/15/18	END DATE 11/05/18	REVISION DATE 10/12/18	PRODUCT YES ON G - PROTECT SLO COUNTY	
ADVERTISER YES ON MEASURE G	ACCOUNT EXECUTIVE KATHY SIGNORELLI	OFFICE San Luis Obispo	P.O. #	Client	Product



**BILLING SUMMARY**

MONTH	GROSS	NET
Oct-18	1,295.00	1,295.00
Nov-18	222.00	222.00

Accepted For Advertiser: \_\_\_\_\_

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Total Occasions	41
Gross	\$1,517.00
Contract Total	\$1,517.00



STATION KJUG-FM	REVENUE TYPE Political Direct	CONTRACT TYPE Regular	BILLING TYPE Calendar	SALE TYPE Standard	CONTRACT # 7424
MAILING ADDRESS YES ON MEASURE G 1745 ROCHELLEWAY OCEANO, CA 93445		AGM California 3620 Sacramento Drive Suite 204 San Luis Obispo, CA 93401		REF # 7222 REV # 1 PRINT DATE 10/24/18 11:16:24	
BUYER	START 10/15/18	END DATE 11/05/18	REVISION DATE 10/12/18	PRODUCT YES ON G - PROTECT SLO COUNTY	Sales Contract
ADVERTISER YES ON MEASURE G	ACCOUNT EXECUTIVE KATHY SIGNORELLI	OFFICE San Luis Obispo	P.O. #	Client Product	

LINE	DAY	TIME	START DATE	END DATE	SPOTS	RATE	TOTL	STATION
1	COM	Mo-Fr	6A-10A MON-FRI	10/15/18	11/02/18	15	1	1
2	COM	M	6A-10A MON-FRI	10/15/18	11/05/18	15	1	1
3	COM	Mo-Th	10A-3P MON-FRI	10/15/18	11/01/18	15	1	1
4	COM	Mo-Th	3P-7P MON-FRI	10/15/18	11/01/18	15	1	1
5	COM	M	3P-7P MON-FRI	10/15/18	11/05/18	15	1	1

Total Occasions	41
Gross	\$1,517.00
Contract Total	\$1,517.00

Accepted For Advertiser:

*[Signature]*

10/24/18

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## AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: <u>KKAL</u> <u>KKTG</u> <u>AGM Calif.</u> <u>K20Z</u> <u>KUEC</u> <u>KSTT</u>	Date: <u>10/22/18</u>
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I, Ann Berry-Gallegos  
do hereby request station time concerning the following issue:

Vote yes on Measure 6

:15's :30's Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
See Attached order's					

Total Charges: \$7,460.<sup>00</sup>

This broadcast time will be used by: Protect SLO County.org

Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"

Yes
  No

For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):

Paid for by coalition to Protect San Luis Obispo County supporting Measure G (FPPC #1402803) Committee major funding from Center for Biological Diversity

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)

I represent that the payment for the above described broadcast time has been furnished by:

Protect San Luis Obispo County Center for Biological Diversity

and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:

a corporation;  a committee;  an association;  or other unincorporated group.

The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):

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

I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least 48 hours before the time of the scheduled broadcasts.

TO BE SIGNED BY ISSUE ADVERTISER

10/24/18  
Date

[Signature]  
Signature

805 441-4897  
Contact Phone Number

TO BE SIGNED BY STATION REPRESENTATIVE

Accepted  Accepted in Part  Rejected

[Signature]  
Signature

Kathy Signorale E.M.  
Printed Name

Title