



Post Office Box 1159; Toccoa, Georgia 30577
(706) 886-2191 (706) 282-0189 (fax)
www.wnegradio.com

RADIO ADVERTISING AGREEMENT

Page ____ of ____

Date: **May 18, 2018**
Business Name: **Dan Gasaway-Pol**
Authorized Employee: _____
Address: **P.O. Box 700**
Homer, Ga. 30547
Phone: _____
FAX: _____
Email Address: _____
Client No: _____
Sales Executive: **13**

Agency: _____
Discount: _____
Co-Op: _____

Description: _____
Start Date: **Friday, May 18, 2018**
End Date: **Tuesday, May 22, 2018**
Cart No: _____
Length: **30**

Special Instructions:

wrote on 5/18/18 @1:18p,2:18p,2:40p,3:50p,5:18p,7:18P,8:40p,9:40p

Advertising Schedule

Date			Time		Days							Rate	Memo
	Start	End	Start	End	Mon	Tues	Wed	Thur	Fri	Sat	Sun		
1	05/18/18	05/18/18	1:00 PM	10:00 PM					8			\$ 13.00	
2	05/19/18	05/22/18	6:00 AM	10:00 AM	6	4				4	1	\$ 13.00	
3			10:00 AM	3:00 PM	7	4				4	2	\$ 13.00	
4			3:00 PM	7:00 PM	6	4				4	3	\$ 13.00	
5			7:00 PM	10:00 PM	3					3	2	\$ 13.00	
6													
7													
8													

Add attachment page if additional Schedule space is required.

Total Units:	65	Cost Per Unit:	\$ 13.00	Gross:	Net:	\$ 845.00
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Terms: This advertisement order represents confirmation of the agreement between Agency/Client and station. Unless otherwise agreed to by the parties, full payment is required at time of order. When credit is approved, station will bill at end of month. Payment for all ads is due as broadcast and payable no later than the tenth calendar day of the month after the ads were broadcast or the services were provided. Client agrees to pay on time without regard to actions by other parties involved on their behalf. Client agrees to pay all cost of collection (including attorney's fees) and that necessary litigation will be in a court within a jurisdiction of radio station's license. Canceling the contract requires full payment of all amounts due. Upon cancellation, payment shall include the difference between the contracted value and the rate determined by the actual number of ads broadcast. Canceling will stop broadcasting but not change the contract obligation to pay the difference between the contracted value and the rate determined by the actual number of ads broadcast for all ads broadcast prior to cancellation. A 72 hour notice is required to cancel any advertisement. (Long-term agreements require 30 day notice to cancel.)

All scripts and programs will comply with applicable local, state and federal laws and regulations. The undersigned personally guarantees, unconditionally and at all times, the payment when due and all indebtedness of Agency/Client to the station. This agreement constitutes the full and complete agreement of the parties and supersedes all prior negotiations, proposals and agreements, either oral or written, between the parties.

☐ If checked, the terms of this agreement contains a long-term commitment or a special discounted rate package. Should Agency/Client cancel before said term expires, a regular per spot rate of _____ will be retroactively applied to Agency/Client's account. This includes any past paid invoices which are part of this agreement.

The parties to this advertising agreement affirm that nothing in this agreement, or any of the actions, benefits and obligations relating to it, discriminate in anyway on the basis of race or ethnicity.

Agreed and Accepted for Participating Business:

For Radio Station:

Dan Gasaway-Pol
Client Business Name

Phil Hobbs
Sales Executive

Signature

Signature

Date

Date

May 18, 2018

Rev 8-2016

AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ FEDERAL CANDIDATE

☒ STATE/LOCAL CANDIDATE

To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3

Station and Location: <u>WMEC - Tallahassee, FL</u>	Date: <u>5/18/18</u>
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I, DAN Forsaway,

being/on behalf of: _____,

a legally qualified candidate of the Republican

political party for the office of: for House Dist. 29

in the Primary

election to be held on: May 22, 2018

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
<u>:30</u>	<u>Reps</u>	<u>5</u>		<u>65</u>	<u>1</u>

Attach proposed schedule with charges (if available):

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

Dan Conway

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

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

To Be Signed By Candidate or Authorized Committee

5/18/18
Date

La. Governor
Signature

To Be Signed By Station Representative

☒ Accepted

☐ Accepted in Part

☐ Rejected

Julie Lee
Signature

Phil Hobbs
Printed Name

CEO
Title