

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, William Todd Drown, 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: William Todd Drown

Authorized committee: _____

Agency requesting time (and contact information):
 N/A

Candidate's political party: Republican

Office sought (no acronyms or abbreviations):
Coshocton City Law Director

Date of election: November 8, 2023
 General
 Primary

Treasurer of candidate's authorized committee: _____

The undersigned represents that:

(1) the payment for the broadcast time requested has been furnished by (check one box below):
 the candidate listed above who is a legally qualified candidate, or
 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 (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.

Candidate/Committee/Agency	Station Representative
Signature: Name: <u>Stephanie Conrad</u>	Signature: Name: <u>Rebecca S. Jacobs</u>
Date of Request to Purchase Ad Time: <u>1/25/23</u>	Date of Station Agreement to Sell Time: <u>1/25/23</u>



Order to Broadcast

The Coshocton Broadcasting Company
 114 North Sixth Street
 Coshocton, Ohio 43812
 740-622-1560

Agency	Client Drown for Lawn Director	Affidavit	Signature/Date
		yes	1/25/23
		Start 1/25/23 End 1/31/23 Salesperson Pol	
Account # 10764		<input type="checkbox"/> 60 sec	4881
		<input checked="" type="checkbox"/> 30 sec	WR _____ Frames _____

6-10	10-3	3-7	7-11	ROS On-Off	ROS 6-7	bl
					12	
					12	
					3	✓
					12	✓
					12	✓
					12	✓
					12	✓
					12	✓
					75	

Mon
Tue
Wed
Thur
Fri
Sat
Sun
Total

6-10	10-3	3-7	7-11	Noon	4:00	ROS On-Off	ROS 6-7
							13
							13
							5
							13
							13
							13
							13
							7
							77

AM Summary

ads @ \$10 = _____
 ads @ \$7 = _____
 ads @ \$8 = _____
 ads @ \$6 = _____
 75 ads @ \$ 7.75 = _____
 75 ads @ \$ 8.33 = 624.75
 Blitz = _____
 75 TOTAL = 624.75

FM Summary

ads @ \$14 = _____
 ads @ \$10 = _____
 ads @ \$12 = _____
 ads @ \$9 = _____
 ads @ \$ 11.25 = _____
 77 ads @ \$12.00 = 924.00
 Blitz = _____
 Remotes = _____
 Remotes(In) = _____
 77 TOTAL = 924.00

Nondiscrimination Policy. Coshocton Broadcasting Co. and stations WTNS (AM/FM) do not discriminate in advertising arrangements on the basis of race or ethnicity. Any provision in any advertising agreement entered into with an advertiser whose intent is to discriminate in such manner shall be null and void.

Both \$1548.75

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:

[Handwritten Signature]

Name:

Stephanie Conrad

Date:

1/25/23

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station?

Yes

No

Date ad received:

1/25/23

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

Federal candidate certification signed (above):

Yes

No

N/A

Disposition:

Accepted

Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)*

Rejected – provide reason:

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

Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag):

Contract #:

Station Call Letters:

WTNS

Date Received/Requested:

1/25/23

Est. #:

Station Location:

Cashier Onw

Run Start and End Dates:

1/25/23 - 1/31/23

Upload order, this form and invoice (or traffic system print-out) or other documents 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 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.



January 27th, 2023



To Whom It May Concern:

These ads ran by the potential candidate, Todd Drown, to gather signatures for his petition for candidacy. Since he was not a candidate at the time these ads aired this probably didn't need to be filed, but we wanted to include it to be on the save side.

Sincerely,

Bruce Wallace

Coshocton Broadcasting Company

Station Manager

WTNS AM/FM

114 N. Sixth St.

Coshocton, OH 43812

Phone:

740-622-1560

Fax:

740-622-7940

Email:

wtns993@yahoo.com

Website:

mywtnsradio.com