

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, MATTHEW J. CONTRERAS, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE →

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Matthew Contreras

Authorized committee:

Matthew Contreras

Agency requesting time (and contact information):

N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

State Representative 139th District

Date of election:

4/23/24

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:

Matthew J. Contreras

Signature:

Linda Harrison

Name:

MATTHEW J. CONTRERAS

Name:

Linda Harrison

Date of Request to Purchase Ad Time:

4/10/24

Date of Station Agreement to Sell Time:

4/10/24

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:

MATTHEW J. CONTRERAS

Date:

4/10/2024

TO BE COMPLETED BY STATION ONLY

Ad submitted to Station?

Yes

No

Date ad received:

4/10/24

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:

WDNH

Date Received/Requested:

4/10/24

Est. #:

Station Location:

Honesdale, PA

Run Start and End Dates:

4/15/24 - 4/22/24

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.

BROADCAST AGREEMENT WDNH

Date 04/10/24 Rep Linda
 Client Matthew Contreras for State Representative Product political
 Agency _____
 Address 106 Milford Heights Terrace
Milford, PA 18337

Contact Matthew Contreras
 Phone 646-243-6993 Email info@mc4pa.com
 Statement _____ Summary _____ Detailed _____ Detailed Notorized _____ Detailed Notarized w/ Script _____
 Start Date 04/15/24
 End Date 04/22/24 _____ :60 _____ :30 _____ :15 _____ :05 _____ DigitalBOLD

Weeks Of	Times	Rate	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Total	Wks	Spts	Total \$	
										0		0	\$0.00	
										0		0	\$0.00	
04/15/24	6a-7p	\$25.00	2	4	4	4	4			18	1	18	\$450.00	
										0		0	\$0.00	
04/22/24	6a-7p	\$25.00	7							7	1	7	\$175.00	
										0		0	\$0.00	
										0		0	\$0.00	
										0		0	\$0.00	
										0		0	\$0.00	
										0		0	\$0.00	
										0		0	\$0.00	
										0		0	\$0.00	
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										0		0	\$0.00	
										0		0	\$0.00	
										0		0	\$0.00	
Digital Bold Cost Per Month:									Total Number of Months			NA		\$0.00

Special Instructions	Total Commercials	25
	Budget Bill Amount	
	Gross Amount	\$625.00
	Agency Commission	\$0.00
	Net Amount	\$625.00

Terms and agreement of Bold Gold Media Group: All invoices are to be paid net 30 days. A finance charge of 1.5% will be compounded monthly on unpaid invoice. The undersigned hereby personally guarantees the prompt payment and performance of the above "client" in accordance with the terms of this contract. This station does not discriminate in the sale of advertising time, and will accept no advertising which is placed with an intent to discriminate on the basis of race or ethnicity. Advertiser hereby certifies that it is not buying broadcasting air time under this advertising sales contract for a discriminatory purpose, including but not limited to decisions not to place advertising on particular stations on the basis of race, national origin, or ancestry.

Authorized by Client _____ Date 4/10/2024 Accepted by Bold Gold Media _____ Date 4/10/24