

CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Dean Wink, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE →

☐ FEDERAL CANDIDATE
☒ STATE OR LOCAL CANDIDATE

ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Dean Wink

Authorized committee:

Dean Wink for S.D. House

Agency requesting time (and contact information):

☐ N/A

Candidate's political party:

Republican

Office sought (no acronyms or abbreviations):

South Dakota House of Representatives District 29

Date of election:

June 2, 2020

☐ General

☒ Primary

Treasurer of candidate's authorized committee:

Dean Wink

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:

Dean Wink

Signature:

Tim Christofferson

Name: Dean Wink

Name: Tim Christofferson

Date of Request to Purchase Ad Time:

Date of Station Agreement to Sell Time:

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:

TO BE COMPLETED BY STATION ONLYAd submitted to Station? ☒ Yes ☐ No Date ad received: _____**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:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:

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.

KSLT-KLMP-KTPT
1853 FOUNTAIN PLAZA DR.
RAPID CITY, SD 57702

Order #: 1 30767
Description: SD HOUSE
Date Entered: 5/21/2020
P.O.#:
Salesperson: Christofferson, Tim
Invoice Frequency: Billed at end of Cal Month, Sorted by Date

DEAN WINK FOR SD HOUSE
PO BOX 137
HOWES, SD 57748

On-Air Schedule

	<u>Start Date</u>	<u>End Date</u>	<u>Station</u>	<u>Scheduled Time/Event</u>	<u>Repeated</u>	<u>Length</u>	<u>Qty</u>	<u>Rate</u>	<u>Total</u>	<u>M</u>	<u>Tu</u>	<u>W</u>	<u>Th</u>	<u>F</u>	<u>Sa</u>	<u>Su</u>
1	5/22/2020	5/26/2020	KSLT	05:00:00 to 20:00:00	Weekly	:30	22	8.00	176.00	5	5	0	0	4	4	4
2	5/27/2020	6/1/2020	KSLT	05:00:00 to 20:00:00	Weekly	:30	24	8.00	192.00	4	0	4	4	4	4	4
3	6/2/2020	6/2/2020	KSLT	05:00:00 to 14:00:00	Weekly	:30	4	8.00	32.00	0	4	0	0	0	0	0

Order Start Date: 5/22/2020

Order End Date: 6/2/2020

Spots: 50

Total Charges:

\$400.00

Projected Calendar Month Billing Totals for DEAN WINK FOR SD HOUSE / 1 30767 :

		<u>Spot Count</u>	<u>Net Billing</u>
May	2020	42	\$336.00
June	2020	8	\$64.00
Total:		50	\$400.00

Confirmed & Accepted for KSLT-KLMP-KTPT By:

Accepted for DEAN WINK FOR SD HOUSE By:

Please Sign and Return One Copy