

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location: <p style="text-align: center; font-size: 1.5em;">W64</p>	Date: <p style="text-align: center; font-size: 1.5em;">12/13/19</p>
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I, Hadron Strategies

do hereby request station time concerning the following issue:

Global Medical Response

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
See Schedule	See Schedule	See Schedule	See Schedule	See Schedule	See Schedule

This broadcast time will be used by: Global Medical Response

**THIS PAGE MUST BE COMPLETED FOR PROGRAMMING THAT
DOES NOT "COMMUNICATE A POLITICAL MATTER OF NATIONAL
IMPORTANCE"**

I represent that the payment for the above described broadcast time has been furnished by (name and address):

Global Medical Response
209 State Highway 121 Bypass Ste 21, Lewisville, TX 75067

and you are authorized to announce the time as paid for by such person or entity (hereinafter referred to as the "sponsor").

List the chief executive officers or members of the executive committee or the board of directors below (or attach separately):

Donna Itzoe - Senior Vice President

