

RECORD OF REQUEST FOR PURCHASE OF POLITICAL TIME

CANDIDATE/AUTHORIZED COMMITTEE FORM

FORM TO BE COMPLETED AT TIME OF ORDER AND PLACED IN POLITICAL/ PUBLIC INSPECTION FILE

1. **Date of Request:** 05/21/2018
2. **Name of Agency making the Request:** Shorr, Johnson & Magnus
3. **Address of Agency making the Request:** 100 N 20th St #201
Philadelphia, PA 19103
4. **Name of Agency Contact making the Request:** Mike Detorre
5. **Telephone Number of Agency Contact making the Request:** 215-567-4080
6. **Name of Candidate:** Bob Casey Jr.
7. **Name of Candidate's Authorized Committee:** Bob Casey for Senate
8. **Name of Treasurer of Candidate's Committee:** Charles Lyons
9. **Legally-Qualified Candidate for the Office of:** US Senate
In the State/District/City/other of: PA
10. **Election:**

| | | | | | | | |
|------------------|-------------------------------------|----------|-------------------------------------|------------|--------------------------|-------|--------------------------|
| PRIMARY ELECTION | <input type="checkbox"/> | Democrat | <input type="checkbox"/> | Republican | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| GENERAL ELECTION | <input checked="" type="checkbox"/> | Democrat | <input checked="" type="checkbox"/> | Republican | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| CAUCUS | <input type="checkbox"/> | Democrat | <input type="checkbox"/> | Republican | <input type="checkbox"/> | Other | <input type="checkbox"/> |
11. **Request to Purchase Time:** ☒ ACCEPTED BY SYSTEM ☐ REJECTED BY SYSTEM
12. **Reason for Rejection:**

13. **If request to purchase time is ACCEPTED attach a copy of (i) the Insertion Order/Agreement including schedule of time purchased, rates charged, class of time purchased, (ii) Invoice, and (iii) Affidavit of Performance indicating dates and times the advertisement aired.**

Signed: Sarah Higgins
Signature of Individual Receiving Request

Date: 05/22/18