

MAY, 2024

NEW

CHANGE

CANCEL

Oconee Radio Group
1011 Founders Row
Suite 101
Greensboro, GA 30642



Advertiser: CELESTE THOMPSON

Address: _____

City/State: _____ Zip: _____

Contact: CELESTE THOMPSON Phone 706-444-3545

Email: _____

Date: MAY 6, 2024

Sales Rep: EMIP

Send Invoice Via: Mail Email No Invoice

Business Category: GOVERNMENT

Customer Type: Local Agency Political PSA/Promo Trade

Notarized Affidavit: None Dates, Times, Rates

Agency Rate: Gross (Add 15% Discount) Net (15% Discount Included)

Billing Cycle: Calendar Broadcast End

Co-Op: Yes No

Co-Op Name: _____

STATION(S)	START DATE	END DATE	BEGIN TIME	END TIME	LENGTH	NUMBER OF SPOTS							BILLING (PICK ONLY ONE)			
						M	T	W	R	F	S	N	PER SPOT	PER MONTH	TOTAL COST	
WDDK	5/8/24	5/13/24	6AM	8PM	:30	4		4	4	4	4	4		\$1,008	\$	\$
WLUK	5/8/24	5/13/24	6AM	8PM	:30	4		4	4	4	4	4		\$1,008	\$	\$
WMMG	5/8/24	5/13/24	6AM	8PM	:30	4		4	4	4	4	4		\$2,227	\$	\$
WDDK	5/14/24	5/21/24	6AM	8PM	:30	13	13	13	13	13	13	13		\$1,008	\$	\$
WLUK	5/14/24	5/21/24	6AM	8PM	:30	13	13	13	13	13	13	13		\$1,008	\$	\$
WMMG	5/14/24	5/21/24	6AM	8PM	:30	13	13	13	13	13	13	13		\$2,227	\$	\$

PRODUCTION INFORMATION (REQUIRED):

Existing copy will be used. New copy will be submitted.

CC 216401

SPECIAL INSTRUCTIONS (OPTIONAL):

ADDITIONAL ORDER
GRANDECO TAX COMMISSIONER

567.04 - ADDITIONAL

TERMS OF THIS CONTRACT APPEAR ON THE NEXT PAGE. PLEASE READ CAREFULLY.

Account Executive: _____

Advertiser Signature: _____

Station Management: _____

Title: _____

Date: _____