CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.		
David Becker	, hereby request station time as follows:	
	j jassi satism time as ronows.	
IDENTIFY CANDIDATE TYPE	DERAL CANDIDATE	
STA	TE OR LOCAL CANDIDATE	
ALL OUESTIONS/BLOC	KS MUST BE COMPLETED	
Candidate name:	K3 MOST BE COMPLETED	
Bob Stefanowski		
Authorized committee:		
Bob for Govenror		
Agency requesting time (and contact information):		
N/A		
Candidate's political party: Republican		
Office sought (no acronyms or abbreviations): Governor		
Date of election: 11/8/22	✓ General Primary	
Treasurer of candidate's authorized committee: David Becker		
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: David Becker, Treasurer on behalf of Bob for Governor	Signature: Man Mand	
Name: David Becker	Name: Silving Monding?	
Date of Request to Purchase Ad Time: 11/4/22	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 ONLY		
Ad submitted to Station? Yes No Date ad received: 11 09/22		
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 #: \ 806 -001	Station Call Letters; WKYM	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:
purchased or attach separately. If stat	or traffic system print-out) or other documents of time purchased, when spots actually aired, ion will not upload the actual times spots aire that information immediately should be place	the rates charged and the classes of time