American Autoimmune Related Diseases Ass



From: **Skip Quast** Phone: **(202) 895-5043**

Email:

8/24/2021 10:54 AM

Radio Market: WASHINGTON, DC Flight Dates: 08/26/2021 - 08/28/2021

Demo: P 25+

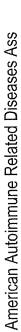
Survey: JUL21/JUN21/MAY21/APR21/MAR21/FEB21

Geography: Metro

						•			
	Daypart	Spots	Length	Unit Rate	32.00	Net Reach	Frequency	Gls	СРМ
Radio Total		19		\$1,315.79		229,700		399,800	\$62.66
WTOP-FM		19		\$1,315.79	\$25,000.00	229,700	1.7	399,800	\$62.66
:30-Second 3 Day Campaign - 1 wk (08/23)	8/23)								
		19		\$1,315.79	\$25,000.00	229,700	1,7	399,800	\$62.66
One Week Total		19		\$1,315.79	\$25,000.00	229,700	1.7	399,800	\$62.66
	W-F 5A-10A	6 30	30	\$1,875.00	\$11,250.00	84,700	1.4	118,800	\$94.70
	W-F 10A-3P	6 30	30	\$750.00	\$4,500.00	94,200	1.4	129,000	\$34.88
	W-F 3P-8P	08 9	30	\$1,500.00	\$9,000.00	008'66	1.3	133,800	\$67.26
	W-F 5A-12M	1 30	30	\$250.00	\$250.00	18.200	1.0	18,200	\$13.74

The first demo listed is the Primary Demo.
This report was created in TAPSCAN using the following Radio information: WASHINGTON, DC; JUL21 / JUN21 / MAY21 / APR21 / MAR21 / FEB21 / JAN21; Metro; Multiple Dayparts Used; P 25+; See Detailed Sourcing Page for Complete

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Schedule Grand Totals: 1 Week

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Accepted by Station

Accepted by Client

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Date

08/24/2021

Date

This station does not discriminate in the sale of advertising time and will accept no advertising which is placed with an intent to discriminate on the basis of race, gender or ethnicity. Advertiser hereby certifies that it is not buying broadcasting air time under this advertising sales contract for a discriminatory purpose, including but not limited to decisions not to place advertising on particular stations on the basis of race, gender, national origin or ancestry.

The first demo listed is the Primary Demo.

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ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

, Molly Murray	, hereby request station time as fo	llows: See Order for proposed		
schedule and charges. See Invo	ice for actual schedule and charges	•		
Check one:				
(1) a legally qualified candidate	e relating to any political matter of national e for federal office; (2) an election to federa , health care legislation, IRS tax code, etc.); c ussion at the national level.	al office; (3) a national legislative		
Ad does NOT communicate a only to a state or local issue).	message relating to any political matter of	national importance (e.g., relates		
ALL QUE	STIONS/BLOCKS MUST BE COM	MPLETED		
Station time requested by: American Au	itoimmune Related Diseases Association	(Letry Doctor Decide. org)		
Agency name: Leighton LLC				
Address: 101 N Loop Blvd E				
Contact: Kyle Leighton	Phone number: (202)415-3326	Email: kyle@leighton.io		
Name of advertiser/sponsor (list entity's committees) with no acronyms; name m	s full legal name as disclosed to the Fede nust match the sponsorship ID in ad):	ral Election Commission [for federal		
Name: American Autoimmune Related Dis	eases Association			
Address: 19176 Hall Road, Suite 130, Clin	ton Township, MI 48038			
Contact: Molly Murray	Phone number: (586) 776-3900	Email: aarda@aarda.org		
Station is authorized to announce the t	ime as paid for by such person or entity.			
List ALL chief executive officers, members of the executive committee and the board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary.): Molly Murray, President and CEO Lower Simpson - CEO Cuting Cruch or - VP, Accountry				
By signing below, advertiser/sponsor rep executive committee and board of direct	resents that those listed above are the only ors or other governing group(s).	y executive officers, members of the		
If ad refers to a federal candidate(s) or	federal election, list ALL of the following	: N/A		
Name(s) of every candidate referred to	:			
Office(s) sought by such candidate(s) (r	no acronyms or abbreviations):			
Date of election:				
Clearly identify EVERY political matter ad (no acronyms); use separate page if Healthcare access	of national importance referred to in the necessary:	N/A		

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

Advertiser/Sponsor		Station Representative			
Signature: Molly Murray Digitally signed by Molly Murray Date: 2021.08.24 08:22:12-05'00'		Signature: Sky US			
Name: Molly Murray		Name: Ship Quart			
Date of Request to Purchase Ad Time: ,	August 24, 2021	Date of Station Agreement to Sell Time: 8/24/2021			
TO I	BE COMPLETED	BY STATION ON	NTA.		
Ad submitted to station?	No No	Date ad received:	8 24 20'21		
Note: Must have separate PB-19 forms for each version of the ad (i.e., for every ad with differing copy).					
If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.					
Disposition: Accepted Accepted IN PART (e.g., ad not received to determine content)* Rejected – provide reason:					
*Upload partially accepted form, then promptly upload updated final form when complete.					
Date and nature of follow-ups, if any:					
Contract #: 52397	Station Call Letters:	T .	Date Received/Requested:		
Est. #: 082521	Station Location: Washington		Run Start and End Dates:		
For national issue ads only (not requir	ed for state/local i	ssue ads):	er i Maria de La Caracteria de La Caract		

Upload order, this disclosure form and invoice (or traffic system print-out) or other material 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 (including date, time, class of time and reasons for any make-goods or rebates) 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.