## ORDER

**Orders** Order / Rev: 556069 Alt Order #: Product Desc: KLOB-FM Estimate: Flight Dates: 10/27/20 - 11/03/20 Primary AE: Vicky Patel - 7446 Original Date / Rev: L-P\$ 10/25/20 / 10/26/20 Sales Office: Order Type: **GENERAL** Sales Region: LOCAL **Kiner Communications** Agency Name: **Buying Contact:** Billing Type: Cash **Billing Contact:** Billing Calendar: Broadcast **EOM** c/o Scott Kiner 73005 Haystack Road Billing Cycle: Palm Desert, CA 92260 **Agency Commission:** 15% Advertiser Name: Stephanie Virgen CVUSD Board of Dir Demographic: HH New Business Thru: **Product Codes:** Candidates Advertiser External ID: 0012R00002BjZvH Revenue Code 1: **AGY** Agency External ID: 001E000000jNb22IAC Revenue Code 2: **GEN** Unit Code: General Revenue Code 3: POL

Bill Plan

 Start Date
 End Date
 # Spots Gross Amount
 Net Amount

 10/26/20
 11/29/20
 21
 \$645.00
 \$548.25

**Totals** 

Month	# Spots	Gross Amount	Net Amount	Rating
November 2020	21	\$645.00	\$548.25	0.00
Totals	21	\$645.00	\$548.25	0.00

**Account Executives** 

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
Vicky Patel - 7446			Start Of Order - End Of Order	100%

_Ln Ch	Start	End	Inventory Code	Break	Start/End	Time Days	Len Sp	oots	Rate Pri F	Rtg Type	Spots	Amount
N 1 KLOB	10/27/2	0 11/03/20	M-F 6a-10a M-F 6a-10a	СМ	6a-10a	MTWTF	1:00	0	\$35.00P-04	0.00 NM	11	\$385.00
<u>Sta</u> Week: 10/3 Week: 11/9		End Date 11/01/20 11/08/20	Weekdays -TWT MT	Spots/Week 6 5	<u>Rate</u> \$35.00 \$35.00	Rating 0.00 0.00						
N 2 KLOB	10/27/2	0 11/02/20	M-F 10a-3p M-F 10a-3p	СМ		MTWTF	1:00	1	\$35.00P-04	0.00 NM	4	\$140.00
<u>Sta</u> Week: 10/: Week: 11/		End Date 11/01/20 11/08/20	<u>Weekdays</u> -TWT M	Spots/Week 3 1	<u>Rate</u> \$35.00 \$35.00	Rating 0.00 0.00						
N 3 KLOB	10/31/2	0 11/01/20	Sa-Su 6a-7p Sa-Su 6a-7p	СМ	6a-7p	SS	1:00	6	\$20.00P-04	0.00 NM	6	\$120.00
<u>Sta</u> Week: 10/	<u>rt Date</u> 26/20	End Date 11/01/20	<u>Weekdays</u> SS	Spots/Week 6	<u>Rate</u> \$20.00	Rating 0.00						
								•	T	otals	21	\$645.00

## CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges	. See Invoice for actual schedule and charges.
LEST KINER	, hereby request station time as follows:
I DENTIFY CANDIDATE TYPE	ERAL CANDIDATE TE OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCE	KS MUST BE COMPLETED
Candidate name:	84113 Bella Roma Lauc
Stephanie Viagen -	Coachella, CA 92236
Authorized committee:	
Agency requesting time (and contact information):	
NA KINER COMMUNICATIONS	
Candidate's political party:	
NA	
Office sought (no acronyms or abbreviations):	
Concretta Valley Unified School Dis	raict Board of Directors Grea #1
Date of election:	General Primary
Treasurer of candidate's authorized committee:	
Stephanie Vingen	
The undersigned represents that:	
(1) the payment for the broadcast time requested has been ful	
the candidate listed above who is a legally qualified ca	
the authorized committee of the legally qualified candi	
(2) this station is authorized to announce the time as paid for b	
(3) this station has disclosed its political advertising policies, including and other sales practices (not applicable to federal candida	cluding applicable classes and rates, discount, promotion tes).
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY
Candidate/Committee/Agency	Station Representative
Signature:	Signature:
Name: Scott River	Name: Leonides Vasquez
Date of Request to Purchase Ad Time: 10/33/20	Date of Station Agreement to Sell Time: 10/26/2020

for a duration of at least four seconds a the candidate approved the broadcast	the broadcast matter to be aired pursuant (2) contains a clearly identifiable photogra and a simultaneously displayed printed stat and that the candidate and/or the candidations a personal audio statement by the candidate has approved the broadcast.	ph or similar image of the candidate tement identifying the candidate, that ate's authorized committee paid for the
Candidate/Authorized Committee	e/Agency	
Signature:		
Name:		The second secon
Date:		
	O BE COMPLETED BY STATION (	ONLY
·	Yes No Date ad received	
Federal candidate certification signed (	above): Yes No	N/A
Rejected – provide reason:	oy not yet received to determine sponsor l	
Date and nature of follow-ups, if any (e.	g., insufficient sponsor ID tag):	
Contract #:	Station Call Letters:	Date Received/Requested:
Est. #:	Station Location:	Run Start and End Dates:
use this space to document schedule of purchased or attach separately. If statio	f time purchased, when spots actually aired n will not upload the actual times spots aire	is reflecting this transaction to the OPIF or I, the rates charged and the classes of time and until an invoice is generated, the name and in the "Terms and Disclosures" folder in

## Stephanie Virgen for CVUSD Board of Directors

60-Second Spots	Spot Cost	26-Oct	26-Oct   11/2 & 11/3   Total Spots   Total Cost	Total Spots	Total Cost
KLOB-FM					
6am-7pm (incl. 10/27, 10/28, 10/29, 11/2 & 11/3)	\$35	3X/Dav	3X/Dav	15	\$525.00
Sat. & Sun. (10/31 & 11/1) - 6am-7pm	\$20	3X/Day		9	\$120.00

Scott Kiner - Kiner Communications - 10/24/20