

KLKK-FM Order Confirmation

OrderID: 5177-009

Sponsor: Scharper For Iowa
 Product: Scharper For Iowa
 Estimate/PO:
 AccountRep: Jamie Nelson
 BillingCycle: Calendar Month
 InvoiceType: Detail
 Run Dates: 10/19/2020 - 10/23/2020
 Items Ordered: 10
 Ordered Amount: \$200.00

KLKK, KSMA, KCZE, KCHA-AM/FM
 Coloff Media (DBA North Iowa Broadcasting)
 201 N. Federal
 Mason City, IA 50401
 KLKK & KSMA (641) 421-7744 or KCHA & KCZE (641) 228-1000

SCHARPER FOR IOWA
 23402 350TH STREET
 OSAGE, IA 50461

Scheduled Station(s): KLKK-FM
 Scharper For Iowa

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| Run Dates | Run Weeks | Run Times | Mon | Tue | Wed | Thu | Fri | Sat | Sun | Week Total | Length | Description | Avail Type | Copy ID | Qty | Item Cost | Total Cost |
|----------------------------|-----------|---------------|-----|-----|-----|-----|-----|-----|-----|------------|--------|-------------|------------|---------|-----|-----------|------------|
| 01 10/19/2020 - 10/23/2020 | All Weeks | 06:00 - 19:00 | 2 | 2 | 2 | 2 | 2 | | | 10 | :60 | Spot | | | 10 | 20.00 | 200.00 |

Calendar Month Projected Billing:

| | | | | | | | |
|--------|--------|--------|------|--------|------|---------|--------|
| Oct-20 | 200.00 | Nov-20 | 0.00 | Dec-20 | 0.00 | Q4-2020 | 200.00 |
|--------|--------|--------|------|--------|------|---------|--------|

Accepted by (client signature)

(Station), Marketing Consultant

Non Discrimination Policy: North Iowa Broadcasting, INC and its stations KLKK-FM, KSMA-FM, KCHA-AM/FM, KCZE do not discriminate in advertising arrangements on the basis of race or ethnicity. Any provision in any advertising agreement entered into with an advertiser whose intent is to discriminate in such manner shall be null and void.

Broadcast Order

| | | | | | | |
|-----------------------------|-------------------|------------------------------|---------------------------------|------------------------------|---------------------------------------|---------------------------------------|
| Date: | 10/15/2020 | New <input type="checkbox"/> | Change <input type="checkbox"/> | Add <input type="checkbox"/> | Cancel Order <input type="checkbox"/> | New Business <input type="checkbox"/> |
| Order No. <i>Office Use</i> | | Local Agency: | | | | |
| Advertiser Name: | Scharper for Iowa | Address: | | 23402 350th St | | |
| Contact: | Deb Scharper | City, ST Zip: | | Osage, IA 50461 | | |
| Sales Person: | Jamie Nelson | Phone: | | | | |
| REP Agency: | | Email: | | scharperforiowa@gmail.com | | |

| | | | | | | | | | |
|---------------------|--|--|------------|---|-----------------|--|------|--|--|
| Order Start Date: | 10/19/2020 | Stop Date: | 10/19/2020 | Paper Invoice <input checked="" type="checkbox"/> | Estimate: | | PO # | | |
| If Local Direct, 1 | 1 | Calendar <input checked="" type="checkbox"/> | | Electronic Invoice <input type="checkbox"/> | IDB: | | | | |
| If Agency, 1 | | Broadcast <input type="checkbox"/> | | Email Invoice <input type="checkbox"/> | EM Address: | | | | |
| Revenue Type | Political Local <input type="checkbox"/> | | | Notes on Invoice: | | | | | |
| Trade | <input type="checkbox"/> | Coop <input type="checkbox"/> | | | Internal Notes: | | | | |
| Cart/Ad Number: | | Bulk Contract: | | | | | | | |
| Product Category 1: | | Product Category 2: | | | | | | | |

| Station | Rate | Start Date | End Date | Start/End Time MILITARY TIME | Break Type | M | T | W | R | F | Sa | Su | # Spots/ | Spot Length | Total Spots | Line Cost | EOW |
|---------|---------|------------|----------|--|------------|---|---|---|---|---|----|----|----------|-------------|-------------|-----------|-----|
| KLKK-FM | \$20.00 | 10/19/20 | 10/23/20 | 0600-1900 | Comm | 2 | 2 | 2 | 2 | 2 | | | 10 | :60 | 10 | \$200.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |
| | | 12/31/01 | 12/31/01 | | | | | | | | | | 0 | | 0 | \$0.00 | |

| | | | | | | | | | | | |
|-----------------------------------|------------|---------|------------|-------------------------|---|-------------------------------------|-----------------|-----------|-----------------|-----------------------------------|-----------------|
| Total Billing Per Station: | | | | Additional Notes: | Spot Bill <input checked="" type="checkbox"/> | Level Bill <input type="checkbox"/> | Contract Totals | 10 | \$200.00 | | |
| Station | Billing \$ | Station | Billing \$ | | | | | | | Net Total | \$200.00 |
| | | | | Gross Billing by Month: | | | | | | | |
| | | | | Jan | Feb | Mar | Apr | May | Jun | Total Billing as Entered by Month | |
| | | | | Jul | Aug | Sep | Oct | Nov | Dec | | |
| | | | | | | | \$200.00 | | | \$200.00 | |