

# CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.

I, Pat Field, hereby request station time as follows:

<b>IDENTIFY CANDIDATE TYPE</b>	<input type="checkbox"/> FEDERAL CANDIDATE
	<input checked="" type="checkbox"/> STATE OR LOCAL CANDIDATE

## ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: <u>Pat Field</u>								
Authorized committee: <u>Field For Idaho</u>								
Agency requesting time (and contact information): <input checked="" type="checkbox"/> N/A								
Candidate's political party: <u>Republican</u>								
Office sought (no acronyms or abbreviations): <u>Representative 2713</u>								
Date of election: <u>May 21</u> <input type="checkbox"/> General <input checked="" type="checkbox"/> Primary								
Treasurer of candidate's authorized committee: <u>Janeer Yates</u>								
The undersigned represents that: (1) the payment for the broadcast time requested has been furnished by (check one box below): <input type="checkbox"/> the candidate listed above who is a legally qualified candidate, or <input checked="" type="checkbox"/> 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).  <b>THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.</b>								
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; padding: 5px;">Candidate/Committee/Agency</th> <th style="width: 50%; padding: 5px;">Station Representative</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Signature: <u>Pat Field</u></td> <td style="padding: 5px;">Signature: <u>[Signature]</u></td> </tr> <tr> <td style="padding: 5px;">Name: <u>Pat Field</u></td> <td style="padding: 5px;">Name: <u>Scotty Cameron</u></td> </tr> <tr> <td style="padding: 5px;">Date of Request to Purchase Ad Time: <u>5-8-24</u></td> <td style="padding: 5px;">Date of Station Agreement to Sell Time: <u>5-8-24</u></td> </tr> </tbody> </table>	Candidate/Committee/Agency	Station Representative	Signature: <u>Pat Field</u>	Signature: <u>[Signature]</u>	Name: <u>Pat Field</u>	Name: <u>Scotty Cameron</u>	Date of Request to Purchase Ad Time: <u>5-8-24</u>	Date of Station Agreement to Sell Time: <u>5-8-24</u>
Candidate/Committee/Agency	Station Representative							
Signature: <u>Pat Field</u>	Signature: <u>[Signature]</u>							
Name: <u>Pat Field</u>	Name: <u>Scotty Cameron</u>							
Date of Request to Purchase Ad Time: <u>5-8-24</u>	Date of Station Agreement to Sell Time: <u>5-8-24</u>							

**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: 5-7-24

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 #:	Station Call Letters: <u>KRMV</u>	Date Received/Requested: <u>5-8-24</u>
Est. #:	Station Location: <u>Rupert Twin Falls ID</u>	Run Start and End Dates: <u>5-8 / 5-10</u>

Upload order, this form and invoice (or traffic system print-out) or other documents 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 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.

There are some hotly contested races in this year's primary and what a better way to meet your candidates by joining them for an ice cream social and meet and greet this Saturday at the Albion Park from six until 9 PM in attendance will be Scott Cleveland, Pat Field and Travis Worthington they look forward to seeing you and answering any questions that you might have once again join Scott Cleveland, Pat Field and Travis Worthington for a meet and greet ice cream this Saturday at the Albion Park from six until 9 PM at paired for by field for Idaho Janet Yates treasurer

Date 5-7

New Order  Revised Order  New Address

KZDX  
 KKMV  
 KPTA  
 KBAR  
 KZNO  
 KART  
 KXTA

Advertiser Name: Put Field  
 Address: \_\_\_\_\_  
 Phone/Fax #: \_\_\_\_\_  
 Agency Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone/Fax #: \_\_\_\_\_

Income Acct.  
 Local  
 Agency  
 National Agency  
 Political  
 Trade  
 Advertiser: \_\_\_\_\_

Salesperson Commission: SCOTT  
 Agency Discount: \_\_\_\_\_ %  
 No  Yes  
 Invoice Frequency: \_\_\_\_\_  
 Calendar or EOS  Media or EOS  
 Non-Spot Billing: \_\_\_\_\_  
 Yes  No

Order Entry Date: 5/7  
 Order Number: 4522-0015  
 Customer PO#: \_\_\_\_\_  
 Notary Required  End of Flight  
 Tops & Tails

Receivables Account  
 Cash  Trade  Pre-Pay  
 Order Description: Meet The Candidates

Production Information  
 Copy Name: \_\_\_\_\_  
 Cart#: 8569  Co-op  Yes  No  
Account = not published per Scotty

Start Date	End Date	Abs Time/Log Event	Len	Hours to run (day part)	Rate	M	T	W	T	F	SA	SU	X	Total #	Total \$
5/8	5/10			6A-7P	PRG			5		5					
					10										

Monthly Totals: Jan \_\_\_\_\_ Feb \_\_\_\_\_ Mar \_\_\_\_\_ Apr \_\_\_\_\_ May \_\_\_\_\_ June \_\_\_\_\_  
 Jul \_\_\_\_\_ Aug \_\_\_\_\_ Sep \_\_\_\_\_ Oct \_\_\_\_\_ Nov \_\_\_\_\_ Dec \_\_\_\_\_

Special Instructions: PRG Billing

Order Totals: 15  
 Total Spots: 15  
 Total Dollars: \$150