CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges.	See Invoice for actual schedule and charges.
Tim Goodhila	, hereby request station time as follows:
	, ricresy request station time as follows.
FEDE	RAL CANDIDATE
LIDENTIFY CANDIDATE TYPE	E OR LOCAL CANDIDATE
ALL QUESTIONS/BLOCK	S MUST BE COMPLETED
Candidate name: Goodwi Authorized committee: Goodwin Fox	
Authorized committee:	
Goodwin Fox	touse
Agency requesting time (and contact information):	
N/A	
Candidate's political party: Candidate's political party:	
этом желе положе довежно во во во во во выправнить выстраннить выправнить выправнить выправнить выправнить выправни	оборожного поставля по поставления поставления поставления в пост
RACES ANTATIVE	State House
Date of election:	General Primary
9	Timary
Treasurer of candidate's authorized committee:	
Tim Goodw.	
The undersigned represents that:	
(1) the payment for the broadcast time requested has been fur	nished by (check one box below):
the candidate listed above who is a legally qualified car	· · · · · · · · · · · · · · · · · · ·
the authorized committee of the legally qualified candi	800, 17
(2) this station is authorized to announce the time as paid for b	CONTRACTOR AND CONTRA
(3) this station has disclosed its political advertising policies, inc	
and other sales practices (not applicable to federal candida	
THE CTATION DOES NOT DISCOUNTINESTE OF DEPART DISC	COMMINIATION ON THE DACK OF DACE OF STUNIOSTY
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHINICITY
Candidate/Committee/Agency	Station Representative
Signature: Jam Hadu-	Signature:
Name: Tim Goodwin	Name: Mike Fell
Date of Request to Purchase Ad Time: 4 1/27 4	Date of Station Agreement to Sell Time:

e broadcast matter to be aired pursuant to 2) contains a clearly identifiable photograph d a simultaneously displayed printed stater net that the candidate and/or the candidate ains a personal audio statement by the can didate has approved the broadcast.	or similar image of the candidate ment identifying the candidate, that e's authorized committee paid for the
Agency	
D BE COMPLETED BY STATION O	NLY
No Date ad received:	
ms for each version of the ad (i.e., for	every ad with differing copy).
bove): Yes No	N/A
y not yet received to determine sponsor ID romptly upload updated final form when co	
Station Call Letters: KOTA - AM	Date Received/Requested:
Station Location: Rapid Cl-ly	Run, Start and End Dates:
raffic system print-out) or other documents time purchased, when spots actually aired, will not upload the actual times spots aired t information immediately should be place	the rates charged and the classes of time d until an invoice is generated, the name
	2) contains a clearly identifiable photograph of a simultaneously displayed printed states and that the candidate and/or the candidate ains a personal audio statement by the candidate has approved the broadcast. Agency No Date ad received: ms for each version of the ad (i.e., for each version of the ad (i.e., for each version) y not yet received to determine sponsor ID to y not yet received to determine sponsor ID to y, insufficient sponsor ID tag): Station Call Letters: Station Location: Mand Cly raffic system print-out) or other documents time purchased, when spots actually aired, will not upload the actual times spots aired.

First Air Date	4/15/2024		Date Submitted		4/11/2024	Salesperson	n	Mike Fell			BF	OA	DC	AST	BROADCAST ORDER	ER	
Contract # VT Contract # NL9	 			z 	New Order x	Add	Revise	IF AGEN	IF AGENCY: Name								
Cust/ Adv Name	,	l Go	odwin F	Tim Goodwin For SD House	ISe	, Ne	New Client x	Address	SS								
Billing Address	SS							'									
	[L		Agency Discount?		Yes	Yes Code		∟ 2	Пຶ	Client Code	ď	
Type of business	SS.		<u>.</u>		2000			Dhone.				7.57					TRAFFIC
Contact:					IIIII GOODMIII					ļ		\$, i i i i i i i i i i i i i i i i i i i
Any Special Needs or Instructions?	Needs or Ins	struc	tions?						Local		Nat	National	П	Political	ical		USE ONLY
			Reput	Republican Primary 2024	ary 2024			Alternati	Alternating Weeks		_						CONFIRM
Co-op Billing?		Yes		×	x If Yes, Co-op Descr	Description:				Strea	Streaming			Trade			Z
Ste	Station	Live	Cart	Length	Start Date	End Date	Start Time	End Time	Rate	Σ	ΩL	≯	芷	ட	SS	Total#	Total \$
1 KC			×	30	4/15/2024	4/24/2024	ба	7р	10.00	က	က	က	က	က		24	\$240.00
2 KG	KOTA		×	30	5/20/2024	5/30/2024	ба	7p	10.00	3	2	2	7	ო		21	\$210.00
	KOTA		×	:30	6/1/2024	6/4/2024	6a	7p	8.00						5 5	10	\$80.00
4 KC	КОТА		×	:30	6/3/2024	6/4/2024	ба		10.00	ဖ	ဖ					12	\$120.00
5 KG	KQRQ		×	:30	4/15/2024	4/24/2024	ба	7p	10.00	8	ო	8	т г	е		24	\$240.00
6 KG	Kara		×	:30	5/20/2024	5/30/2024	6a	7p	10.00	8	2	2	2	м		21	\$210.00
7 KG	KORO		×	:30	6/1/2024	6/2/2024	6a	7p	8.00						5	10	\$80.00
8 KC	KQRQ		×	:30	6/3/2024	6/4/2024	6a	7p	10.00	ဖ	9					12	\$120.00
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			-			SPOTS		GROSS REVENUE	VENUE		AGCY	AGCY DSCT 15%	15%		NET R	NET REVENUE	
Rev 12/19				SP(SPOTS:		134	\$	1,300.00		\$				\$	1,300.00	
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Description	\$ per Month	티	4 ‡:1	NOS #	NONSPOT:			€	t		€9				s		
				9	NONSPOT:			\$	•		₩ (\$	- 0000	ī
			I	<u>6</u>	TOTALS		134	9	1,300.00		ss		- 30		ь	1,300.00	II.