

# CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Amber Hulse, hereby request station time as follows:

**IDENTIFY CANDIDATE TYPE**

FEDERAL CANDIDATE

STATE OR LOCAL CANDIDATE

## ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name: Amber Hulse

Authorized committee: Amber for South Dakota

Agency requesting time (and contact information):

N/A

Candidate's political party: Republican

Office sought (no acronyms or abbreviations): State Senate D 30

Date of election: June 4       General       Primary

Treasurer of candidate's authorized committee: Don Ackerman

The undersigned represents that:

(1) the payment for the broadcast time requested has been furnished by (check one box below):

the candidate listed above who is a legally qualified candidate, or

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).

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

**Candidate/Committee/Agency**

**Station Representative**

Signature: Amber Hulse

Signature: Mike Fell

Name: Amber Hulse

Name: Mike Fell

Date of Request to Purchase Ad Time: 4/17/24

Date of Station Agreement to Sell Time: 4-17-24

**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:

4-17-24

**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):

✓ Copy Added – May 16, 2024 gmc

Contract #:

Station Call Letters:

KOTA-AM

Date Received/Requested:

4-17-24

Est. #:

Station Location:

Lead City

Run Start and End Dates:

4/19-6/4 2024

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.

Contract # VT \_\_\_\_\_ New Order  Add  Revise   
 Contract # NL9 \_\_\_\_\_

Cust/ Adv Name: Amber Hulse For SD Senate New Client   
 Billing Address: \_\_\_\_\_

Type of Business: political  
 Contact: Amber Hulse  
 Agency Discount? Yes  No  Client Code \_\_\_\_\_  
 Est No. \_\_\_\_\_ Prod Code \_\_\_\_\_  
 Phone: (605) 890-1175 Fax \_\_\_\_\_

Any Special Needs or Instructions? \_\_\_\_\_  
 Paid By Credit Card - April 12th  
 IF AGENCY: Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Local  National  Political   
 Alternating Weeks  Streaming  Trade

Co-op Billing? Yes  No  If Yes, Co-op Description: \_\_\_\_\_

Station	Live	Cart	Length	Start Date	End Date	Start Time	End Time	Rate	M	TU	W	TH	F	S	S	Total #	Total \$
1			:30	4/19/2024	4/24/2024	6a	7p	10.00	6	6	5		7			24	\$240.00
2			:30	5/20/2024	5/30/2024	6a	7p	10.00	3	2	2	2	3			21	\$210.00
3			:30	6/1/2024	6/4/2024	6a	7p	8.00							5	5	\$80.00
4		X	:30	6/3/2024	6/4/2024	6a	7p	10.00	6	6						12	\$120.00
5																0	\$0.00
6																0	\$0.00
7																0	\$0.00
8																0	\$0.00
9																0	\$0.00
10																0	\$0.00
11																0	\$0.00
12																0	\$0.00
13																0	\$0.00
14																0	\$0.00

Rev 12/19  
 SPOTS: 67  
 STREAMING: \$ 650.00  
 AGCY DSCT 15%  
 NET REVENUE \$ 650.00

Description \$ per Month # Mos  
 NONSPOT: \$ - \$ - \$ -  
 NONSPOT: \$ - \$ - \$ -  
 TOTALS \$ 67 \$ 650.00 \$ - \$ 650.00

TRAFFIC USE ONLY  
 CONFIRM SENT Y N



# PROD



# ORDER



ALL  
  KDDX  
  KZZI  
  KZLK  
  KQRQ  
  KOTA  
  KDSJ

SCHEDULE DATE: 5/20/24

SCHEDULE END DATE: 6/4/24

Multiple Dates/See Below

CLIENT: Amber Hulse For SD Senate

A/E: Mike Fell

LENGTH: :30

REMOTE

REMOTE PROMO (30)

TRADE:  YES

COOP:  YES

COOP/COPY NAME: \_\_\_\_\_

SPONSORSHIP:  WX (15 SEC)  
 NEWS  
 SPORTS  
 MORNING  
 OTHER: \_\_\_\_\_

STREAM:  YES

SCRIPT ATTACHED\*\*:  YES (\*\*Script required 24 hours to start date and time)

MUSIC:  YES    NO

GENRE/TEMPO REQUEST: patriotic instrumental

NEEDS APPROVAL:  NO    YES   TO: Please Choose One

BY DATE: May 17th

SEND AD TO: mike.fell@rapidcity.fm

Production From: Mike Fell E-Mail

Talent: Amber

AD NAME(S)	NEW	ADD	ATT	ISCI CODE	%	LENGTH	RUN DATES		CART(S) PROD USE
May 15 30A	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		50	:30	5/20	6/4	
Vote Today 30	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		50	:30	5/20	6/4	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

**SPECIAL INSTRUCTIONS:**

April, I sent the two VO's over last night. Please add instrumental music and rotate 50-50%. Thanks!!

**PRODUCTION USE ONLY**

**PC**

**NL**

**SKYLA**

WH

CART

ENTER COPY

CHANGE COPY

LOAD

SEND (KDDX or KZZI)