

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ **FEDERAL CANDIDATE**☒ **STATE/LOCAL CANDIDATE**

**To Avail Themselves of The Lowest Unit Charge During a Political Window, Federal Candidates Must Sign The Certification On Page 3**

<b>Station and Location:</b> KHBZ, KOMC, KCAX <div style="font-size: small; margin-top: -10px; margin-left: 100px;">           KHBZ-Harrison, AR            KOMC-Kimberling City, MO            KCAX-Branson, MO         </div>	<b>Date:</b> 7/22/22
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I, Mark w Maples,

being/on behalf of: Mark w Maples, a legally

qualified candidate of the Republican political

party for the office of: Pres Comm

in the Stone Co primary

election to be held on: Aug 2nd

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
30 seconds	7/26-8/1 6a-12a 8/2 6a-10a	⑦ 7/26/22 -8/2/22 Skip over Sunday		168 Commercials in total.	1

**Total Charges:** \$1,963.20

For programming that, in whole or in part, "communicates a message relating to any political matter of national importance," list the matters below:

N/A

I represent that the payment for the above described broadcast time has been furnished by:

Committee To Elect Mark W. Maples

and you are authorized to announce the time as paid for by such person or entity.

I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Teresa L. Maples

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.**

**To Be Signed By Candidate or Authorized Committee**

7-22-22

Date

[Signature]

Signature

**To Be Signed By Station Representative**

☒ Accepted

☐ Accepted in Part

☐ Rejected

[Signature]

Signature

Titus Pinckney

Printed Name

Client Advisor

Title

## AGREED UPON SCHEDULE

**(TO BE FILLED IN ONLY IF STATION DOES NOT ACCEPT ALL OF  
CANDIDATE'S REQUEST)**

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

**Total Charges:**

### AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

- (1) actual air time and charges for each spot;
- (2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- (3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

**Note: Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.**