

## CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, Sherlena Watkins, hereby request station time as follows:

IDENTIFY CANDIDATE TYPE 

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FEDERAL CANDIDATE

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STATE OR LOCAL CANDIDATE

### ALL QUESTIONS/BLOCKS MUST BE COMPLETED

Candidate name:

Sherlena R Watkins

Authorized committee:

Sherlena R Watkins for Metro Council District 5

Agency requesting time (and contact information):

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N/A

Candidate's political party:

Democratic

Office sought (no acronyms or abbreviations):

Metro Council District 5

Date of election:

05/17/2022

☐

General

☒

Primary

Treasurer of candidate's authorized committee:

Dawn Elliott

The undersigned represents that:

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

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

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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.**

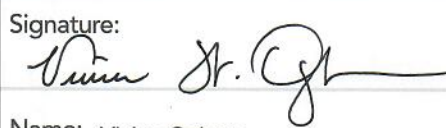
Candidate/Committee/Agency

Station Representative

Signature:



Signature:



Name: Sherlena R Watkins

Name: Vivien Ogburn

Date of Request to Purchase Ad Time: 05/12/2022

Date of Station Agreement to Sell Time: 5/12/22