

Multi-Station Order Confirmation OrderID: 0689-001

Sponsor: Product:

Terron Hayes for Sherriff of Dougherty County Terron Hayes for Sherriff of Dougherty County - May

Estimate/PO:

MAY 2024

AccountRep:

Political

BillingCycle:

Calendar Month

InvoiceType:

Detail

Run Dates:

5/15/2024 - 5/21/2024

Items Ordered: Ordered Amount: \$680.00

TERRON HAYES FOR SHERRIFF OF DOUGHERTY 124 SHADY GLEN LANE **ALBANY, GA 31721**

Scheduled Station(s): WKAK-FM / WQVE-FM Terron Hayes for Sherriff of Dougherty County

11 5/15/2024 - 5/17/2024 AII Weeks 06:00 AM - 10:00 AM 1 1 1 1 3 3 30 Spot 1711 3 32.00 2 2 5/15/2024 - 5/17/2024 AII Weeks 10:00 AM - 03:00 PM 1 1 1 1 3 3 30 Spot 1711 3 32.00 2 3 5/15/2024 - 5/17/2024 AII Weeks 03:00 PM - 07:00 PM 1 1 1 3 3 30 Spot 1711 3 32.00 2 2 2 30 Spot 1711 3 32.00 2 2 2 30 Spot 1711 2 2 2 3 3 Spot 1711 3 3 2 3 0 Spot 1711 2 2 3 2 3 0 Spot 1711 3 3 3 2 3 0 Spot 1711 3 3 3 3 OSpot 1711 3 3 3 OSpot 1711 3 3 3 OSpot 1711
Calendar Month Projected Billing: Apr-24 0.00 May-24 680.00 Jun-24 0.00 Q2-2024

for a duration of at least four seconds are the candidate approved the broadcast a	ne broadcast matter to be aired pursuant to (2) contains a clearly identifiable photogrand a simultaneously displayed printed state and that the candidate and/or the candidate tains a personal audio statement by the candidate has approved the broadcast.	ph or similar image of the candidate ement identifying the candidate, that ate's authorized committee paid for the	
Candidate/Authorized Committee/	/Agency		
Signature:			
Name:			
Date:			
το) be completed by Station C	NLY	
Ad submitted to Station? X Yes No Date ad received: 5/1/14 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 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:	Date Received/Requested:	
Est. #:	Station Location:	Run Start and End Dates	
use this space to document schedule of the purchased or attach separately. If station	time purchased, when spots actually aired will not upload the actual times spots aire	s reflecting this transaction to the OPIF or , the rates charged and the classes of time ed until an invoice is generated, the name ed in the "Terms and Disclosures" folder in	

Federal Candidate Certification:

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.				
	, hereby request station time as follows:			
IDENTIFY CANDIDATE TYPE	ERAL CANDIDATE			
	TE OR LOCAL CANDIDATE			
ALL QUESTIONS/BLOC	KS MUST BE COMPLETED			
Candidate name:				
Terron Haves				
Authorized committee:	1			
Committee to Elect Terron Hay	es Thereoff of Doughert Counts			
Agency requesting time (and contact information):				
N/A				
Candidate's political party:				
Demecral				
Office sought (no acronyms or abbreviations):				
Theriff of Dougherty County Georgia				
Date of election: General Primary				
May 21, 2024				
Treasurer of candidate's authorized committee:				
Michelle Thomas				
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 DISC IN THE PLACEMENT OF ADVERTISING.	RIMINATION ON THE BASIS OF RACE OR ETHNICITY			
THE PLACEMENT OF ADVERTISING.				
Candidate/Committee/Agency	Station Representative			
Signature:	Signature:			
Tom Home				
Name: Tours	Name:			
Terona 1. region	Kond M Kill			
Date of Request to Purchase Ad Time: 5/10/2/	Date of Station Agreement to Sell Time:			