

## CANDIDATE ADVERTISEMENT AGREEMENT FORM

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

I, DAVID GUESS, hereby request station time as follows:

<b>IDENTIFY CANDIDATE TYPE</b> <span style="color: red;">➔</span>	<input type="checkbox"/>	FEDERAL CANDIDATE
	<input checked="" type="checkbox"/>	STATE OR LOCAL CANDIDATE

**ALL QUESTIONS/BLOCKS MUST BE COMPLETED**

Candidate name: <span style="font-size: 1.2em;">DAVID GUESS</span>
Authorized committee: <span style="font-size: 1.2em;">DAVID GUESS FOR CITY COMMISSION</span>
Agency requesting time (and contact information): <input checked="" type="checkbox"/> N/A
Candidate's political party: <span style="font-size: 1.2em;">Republican</span>
Office sought (no acronyms or abbreviations): <span style="font-size: 1.2em;">CITY COMMISSIONER McCracken County</span>
Date of election: <span style="font-size: 1.2em;">11-8-22</span> <input checked="" type="checkbox"/> General <input type="checkbox"/> Primary
Treasurer of candidate's authorized committee: <span style="font-size: 1.2em;">DAVID GUESS</span>
<p>The undersigned represents that:</p> <p>(1) the payment for the broadcast time requested has been furnished by (check one box below):</p> <p><input type="checkbox"/> the candidate listed above who is a legally qualified candidate, or</p> <p><input checked="" type="checkbox"/> the authorized committee of the legally qualified candidate listed above;</p> <p>(2) this station is authorized to announce the time as paid for by such person or entity; and</p> <p>(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).</p> <p><b>THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.</b></p>

Candidate/Committee/Agency	Station Representative
Signature: <span style="font-size: 1.2em;">David Guess</span>	Signature: <span style="font-size: 1.2em;">Christie Bell</span>
Name: <span style="font-size: 1.2em;">DAVID GUESS</span>	Name: <span style="font-size: 1.2em;">CHRISTIE BELL</span>
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: <span style="font-size: 1.2em;">11-2-22</span>

**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: David Gress

Date: 11/2/2022

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to Station?  Yes  No Date ad received: 11-2-22

**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):

Contract #: attached	Station Call Letters: WREZ	Date Received/Requested: 11-2-22
Est. #: attached	Station Location: METROPOLIS IL	Run Start and End Dates: 11-3 → 11-4-22

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.

# BROADCAST/INSERTION ORDER

STATION(S) UTILIZED: WREZ

(call letters only)

NEW ACCOUNT/ADVERTISER

Date: \_\_\_\_\_

NEW ORDER

REVISION OR  ADDITION

Cart #: \_\_\_\_\_

(if revision or addition include confirmation number below)

CONFIRMATION #: \_\_\_\_\_

ACCT. EXECUTIVE: **Christie Bell - House**

CUSTOMER TYPE:

LOCAL  TRADE

CLIENT #: \_\_\_\_\_ Schedule #: \_\_\_\_\_

AGENCY  POLITICAL

KATZ  NON BILL

ADVERTISER: **David Guess - City Commissioner**

DOLLAR SAVING DEALS:

PACKAGE/BILLING ONLY

AGENCY: \_\_\_\_\_

SPOTS ONLY

CERTIFICATE SALES (& ENTER PAYMENT)

ATTN: **David Guess**

SALES TYPE:

NET  GROSS/AGENCY

BILLING INFO:

TIME AFFIDAVIT:  YES NO

MAILING ADDRESS: **1600 Eagle Cove**

CO-OP:  YES NO

BILLING CALENDAR:

BILLING TYPE:

STANDARD BROAD.

Broadcast

MONTHLY CAL.

(Rate)

CITY: **Paducah** STATE: **KY** ZIP: **42001**

PHONE: **270-210-6281** FAX: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

BILLING DELIVERY:

EMAIL/PDF

Level

SPOT DATA

(Monthly)

MAIL

Variable

CONTACT EMAIL: \_\_\_\_\_

BILLING CONTACT: \_\_\_\_\_

BILLING EMAIL: \_\_\_\_\_

BUSINESS CATEGORY: \_\_\_\_\_

CO-OP DESCRIPTION: \_\_\_\_\_ JOB/EST./BUY#: \_\_\_\_\_ EVENT \_\_\_\_\_

PROMOTION/PACKAGE/SPONSORSHIP: **David Guess - City Commissioner**

Line	Length	Start Date	End Date	Begin Time	End Time	Rate	Ads/Week	MON	TUES	WED	THU	FRI	SAT	SUN
1	:30	11/3/22	11/4/22	10a	3p	\$19.41	10				5	5		
2							0							
3							0							
4							0							
5							0							
6							0							
7							0							
8							0							
9							0							
10							0							
11							0							
12							0							
						MONTH	\$ BILLED	# ADS	MONTH		\$ BILLED	# ADS		
						JAN			JUL					
						FEB			AUG					
						MAR			SEPT					
						APR			OCT					
						MAY			NOV		\$194.10			
						JUN			DEC					
Total Ads per Station:				10		INVESTMENT/station:		194.10 WREZ						
OVERALL TOTAL:						OVERALL TOTAL:		\$194.10						

Approved by: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DAVID GUESS FOR PADUCAH CITY COMMISSIONER  
1600 Eagle Cove  
Paducah, KY 42001

102  
73-109/839



11/2/2022  
Date

Pay to the  
Order of

Winters Breadery  
One hundred ninety four dollars & 10/100 \$194.10  
Dollars

FNB BANK  
PADUCAH, KY

PROGRESS FOR PADUCAH



For ADS



David Guess

MP