

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

Station and Location: <u>KASL Newcastle, WY KADQ, Evanston, WY</u> <u>KNYN Evanston, WY</u>	Date: <u>9-28-18</u>
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I, TAMMIE WINGROVE

being/on behalf of: John Barrasso

a legally qualified candidate of the Republican

political party for the office of: U.S. Senate

in the GENERAL

election to be held on: NOVEMBER 6, 2018

do hereby request station time as follows:

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

Attach proposed schedule with charges (if available):

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

FRIENDS OF JOHN BARRASSO

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:

KAREN HINCHY

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

7-1-18

Date

[Signature]

Signature

FRIENDS OF JOHN BARRASSO

To Be Signed By Station Representative

Accepted

Accepted in Part

Rejected

[Signature]

Signature

Julie C. Burleigh

Printed Name

Sales

Title

FEDERAL CANDIDATE CERTIFICATION

In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:

I, FRIENDS OF JOHN BARRASSO
(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

does

does not

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

the 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.

the television programming 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.

Scott Cottington FRIENDS OF JOHN BARRASSO
signature of candidate or authorized committee

SCOTT COTTINGTON 7-11-18
printed name date



Client Information Form
CANDIDATE

Candidate Name: JOHN BARRASSO
Official Campaign Name: FRIENDS OF JOHN BARRASSO
Office/District Running for: U.S. SENATE
Campaign Address: BOX 52008
City, State & Zip Code: CASPER, WY 82605
Campaign Phone: 307-772-1844
Campaign Website URL: BARRASSO FOR WYOMIANG.COM
Campaign Contact Person: TOM WIBLEND
Campaign Treasurer: KAREN HINCHEX

Please complete all sections of this form. Media outlets may not accept advertising if required information is omitted.