

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

| | |
|--|--|
| Station and Location: KCH1-KBBN | Date: Nov 8, 2017 |
|--|--|

I, _____
do hereby request station time concerning the following issue:

Broken Bow School Board Recall Election

| Broadcast Length | Time of Day, Rotation or Package | Days | Class | Times per Week | Number of Weeks |
|--|--|--|-------|--|--|
| 60s | BTA | All | | 8:7 | 2 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Total Charges: 215.00

This broadcast time will be used by: Vote yes

Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"

☐ Yes

☒ No

For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)

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

and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:

☐ a corporation; ☐ a committee; ☐ an association; ☐ or other unincorporated group.

The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):

I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least _____ before the time of the scheduled broadcasts.

TO BE SIGNED BY ISSUE ADVERTISER

Nov 9, 2017 ^X _____
 Date Signature Contact Phone Number

TO BE SIGNED BY STATION REPRESENTATIVE

☒ Accepted ☐ Accepted in Part ☐ Rejected

_____ David Burnie GM
 Signature Printed Name Title

KCNI-AM/KBBN-FM
P.O. BOX 409
79895 HWY 2
BROKEN BOW, NE 68822 USA

VOTE YES FOR BROKEN BOW EDUCATION

Advertiser ID: 2479

Amount Paid

| | | |
|-------------------------|-------------|-------------|
| 2479-00002-0000 | 11/30/2017 | 1 |
| Official Invoice | Date | Page |

DETACH AND RETURN WITH PAYMENT

2479-00002-0000

O 11/30/2017

1

VOTE YES FOR BROKEN BOW EDUCATION

1904 North 17 th Ave
Broken Bow, Ne 68822

Purchase Order Number:

Est. Number:

Co-Op:

Description: Recall Election

Salesperson: House, .

| Date | Day | Length | | Qty | Rate | Total |
|------------------------------|-----|--------|---|-----|--------|---------|
| Copy: Recall Election | | | | | | |
| Recall Election | | | | | | |
| 11/9/2017 | Thu | :30 | KBBN-FM 02:42:00 PM 04:20:45 PM | 2 | \$8.60 | \$17.20 |
| 11/10/2017 | Fri | :30 | KBBN-FM 02:21:00 PM 05:52:30 PM | 2 | \$8.60 | \$17.20 |
| 11/11/2017 | Sat | :30 | KBBN-FM 09:40:30 AM 07:40:30 PM | 2 | \$8.60 | \$17.20 |
| 11/13/2017 | Mon | :30 | KBBN-FM 02:50:30 PM 09:40:30 PM | 2 | \$8.60 | \$17.20 |
| 11/14/2017 | Tue | :30 | KBBN-FM 09:50:00 AM 11:40:00 PM | 2 | \$8.60 | \$17.20 |
| Copy: Recall Election | | | | | | |
| Recall Election | | | | | | |
| 11/9/2017 | Thu | :30 | KCNI-AM 12:36:00 PM 04:19:30 PM 04:36:00 PM | 3 | \$8.60 | \$25.80 |
| 11/10/2017 | Fri | :30 | KCNI-AM 09:55:30 AM 02:12:30 PM 08:46:00 PM | 3 | \$8.60 | \$25.80 |
| 11/11/2017 | Sat | :30 | KCNI-AM 10:24:00 AM 07:40:00 PM | 2 | \$8.60 | \$17.20 |
| 11/12/2017 | Sun | :30 | KCNI-AM 10:24:00 PM | 1 | \$8.60 | \$8.60 |
| 11/13/2017 | Mon | :30 | KCNI-AM 11:19:00 AM 02:36:00 PM 05:41:00 PM | 3 | \$8.60 | \$25.80 |
| 11/14/2017 | Tue | :30 | KCNI-AM 11:55:00 AM 04:10:00 PM 07:10:00 PM | 3 | \$8.60 | \$25.80 |

Visit Us online or on FB at Sandhillsexpress.com.

| | | | |
|------------------|-----------|--------------|-----------------|
| Quantity | 25 | Total | \$215.00 |
| Total Due | | | \$215.00 |

INVOICE